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GLYNN VILLAGE PLAT 10 - SWPPP SITE PLAN

NPDES GENERAL PERMIT NO.2

STORMWATER POLLUTION PREVENTION PLAN FOR CONSTRUCTION ACTIVITY

**Glynn Village – Plat 10
Waukee, Iowa**

**INITIAL SWPPP DOCUMENT PREPARATION BY:
Engineering Resource Group, Inc.**

**For:
Hubbell Metropolitan Development Fund I, LLC**

IMPORTANT NOTICE

This Stormwater Pollution Prevention Plan (SWPPP) shall be retained on the construction site from the date construction activities begin to the date of final stabilization. All contractors working on site shall be supplied a copy of the SWPPP and must sign the certification statement provided. The SWPPP must be updated periodically to show current erosion control practices. It shall be the duty of the OWNER to see that these requirements are met.

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GLYNN VILLAGE – PLAT 10
STORMWATER POLLUTION PREVENTION PLAN

SITE DESCRIPTION

Project Name and Location:	Glynn Village Plat 10 Waukee, Iowa 50263	Owner Information:	Hubbell Metropolitan Development Fund I, LLC 6900 Westown Parkway West Des Moines, Iowa 50266
Description: (Purpose and Types of Soil Disturbing Activities)	<p>This project is a single-family and townhouse residential subdivision expansion consisting of about 143 single-family lots with associated utilities and roadways to be constructed in in this final phase with approximately 60 townhouse units on four (4) large lots.</p> <p>Soil disturbing activities will include: clearing and grubbing, excavation, stockpiling and final grading, construction of temporary entrances/exits and staging areas, installation of utilities, and pavement and building construction.</p>		
Runoff Coefficient:	The final coefficient of runoff for the site will be $C = 0.55$ (5-Year - overall).		
Site Area:	<p>The overall site itself is approximately 93.1 acres.</p> <ul style="list-style-type: none"> • Approximately 6.0 acres will be developed as townhouses. • Approximately 7.6 acres will be modified for the existing detention basin/pond. • Approximately 29.8 acres will be developed as single-family house lots. • Approximately 3.7 acres will remain undisturbed as a riparian vegetative buffer – located westerly of the unnamed stream/creek and northerly of SE Westown Parkway. • The remainder will mainly be public streets, outlots for surface water flowage, and outfalls from all of the site's detention basins/ponds. 		
Approximate Slopes:	3:1 or flatter (Horizontal to Vertical)		
Name of Receiving Waters:	The entire site will drain from a series of public storm sewer into one (1) of the two (2) detention basins within the limits of the plat that then both drain into a unnamed stream/creek, which is located approximately along the westerly property line of the overall project site; then flows southerly into Sugar Creek, which becomes Raccoon River and the Des Moines River.		

ANTICIPATED SEQUENCE OF MAJOR CONSTRUCTION ACTIVITIES

The anticipated order of activities will be as follows:

1. Construct temporary construction exits/entrances and the designated staging area(s).
2. Install perimeter silt fence/filter socks and temporary sediment basins. Stabilize sediment basins and outlets.
3. Begin clearing and grubbing operations. These operations should only take place in those areas where earthwork is expected to take place within 21 days after completion.
4. Site grading shall begin – typically beginning with the stormwater management facilities. Contractor will be responsible for temporarily stabilizing any area that will not be disturbed for at least 21 days no later than 14 days from the last construction activity.

5. Installation of underground utilities. Inlet/outlet protection at all locations specified in the plan shall be installed.
6. Finalize pavement sub-grade preparation.
7. Construct all curb and gutter, inlets, and manholes as specified in the plans.
8. Remove inlet protection around all inlet and manhole structures and carry out final paving operations.
9. Install inlet protection around all inlet structures after final paving is completed.
10. Prepare final backfill, grading, and seeding operations.
11. Stabilization practices as shown on this SWPPP will be maintained throughout building construction of the plat boundary. Previous/Individual lot owners are responsible for producing and maintaining their own stabilization practices as local, state and federal regulations require.
12. Once all paving and permanent stabilization of the site is established, remove silt fence/filter socks and other temporary stabilization measures.
13. Detention basin sediment control shall remain in place until all structures in subdivision have been completed. Remove accumulated sediment from detention basin.

EROSION AND SEDIMENT CONTROLS

The contractor/subcontractor (co-permittees) shall be responsible for the implementation and management of control measures for the following erosion and stormwater management control measures that are specific to this site. This work shall be done in accordance with Division 9 of the SUDAS Urban Standard Specifications for Public Improvements and the condition of the General Permit No. 2 issued by the Iowa Department of Natural Resources (IDNR) included in this SWPPP. As work progresses, additional erosion control items may be required as determined by the City, engineer, or other governmentally regulated agencies after field investigation.

Permanent Stabilization Practices

- Permanent seeding and planting of all unpaved areas by seeding, fertilizing, and mulching shall be completed after final grading is complete. Seed shall be sown at only those times of the year when temperature, moisture, and climate conditions will promote germination and plant growth. Normal application dates are between March 1 and May 31 and between August 10 and September 30.
- All seeded surfaces shall be covered with four (4) inches (minimum) of topsoil at final stabilization.
- Vegetation in areas not needed for construction shall be preserved.

Permanent Structural Practices

- Outlet protection of storm sewers using rip-rap and engineering fabric.
- Stormwater detention facilities to detain and infiltrate flows.
- Storm sewer and curb and gutter to divert stormwater.

Temporary Stabilization Practices

- The use of temporary seeding, mulching, sodding and diversion dikes to help control sediment and erosion. If construction activity is not planned to occur in a disturbed area for at least 21 days, the area shall be stabilized by temporary seeding or mulching no later than 14 days from the last construction activity.
- Mulching exposed areas.
- Silt fence/filter socks shall be used for protection of inlets and used as ditch checks along temporary and permanent drainage ditches.
- Install below grade inlet protection device in public streets after pavement is placed.
- At areas where runoff can move off-site, silt fence/filter socks shall be placed along the perimeter of areas to be disturbed prior to beginning grading, excavation or clearing and grubbing operations.
- Frequent watering during construction shall minimize wind erosion from exposed earth and control dust. No petroleum based products allowed.

Temporary Structural Practices

- Temporary Sediment Basins shall be provided at a rate of 3,600 cubic feet of storage per acre disturbed over

ten (10) acres. If 3,600 cubic feet per ten (10) acre area drained is not attainable, a combination of silt fences/filter socks, multiple sediment traps, or equivalent sediment controls may be used.

- Temporary Sediment Traps may be used to store sediment for drainage areas approximately 2.5 acres in size.

PERMANENT STORMWATER MANAGEMENT

The areas that are not developed will be graded at less than 3:1 (H:V) and will have permanent seeding or plantings. All run-off from this property will be pumped into the North Raccoon River. The permanent onsite dry bottom permanent detention basin has been designed to release at a 5-year pre-developed design rate. The storm sewer discharge point is an existing storm structure on Dart Way as seen on the site plan. Silt fence and temporary erosion control structures will not be removed until all upslope areas have been stabilized. Permanent stormwater management controls include curb and gutters, storm sewer intakes, storm sewer pipes, large shallow detention facility to promote groundwater recharge, outlet structures comprised of flared end sections with rip-rap at ends to prevent erosion and open sided intakes. The existing dry bottom detention basin shall be seeded with an urban mix to promote better soil stabilization and maintenance on any and all disturbed areas and any unstabilized areas.

Maintenance: All stormwater controls shall be inspected on a minimum of a quarterly basis. Debris such as trash, straw, grass clippings, leaves, etc. and silt shall be removed from storm sewer intakes. Grass waterways shall be checked for erosion and corrective action taken as needed. Any brush or volunteer trees that inhibit waterway flow shall be removed.

OTHER CONTROLS

Waste Materials:

All trash and waste materials will be collected and stored in a securely lidded metal dumpster. The dumpster shall meet applicable local and state solid waste management regulations. All trash and construction debris from the site will be deposited in the dumpster. No construction waste materials shall be buried onsite. Concrete wash-out areas shall meet the minimum criteria of the EPA's BMP's. All personnel will be instructed regarding the correct procedure for waste disposal. Notices stating these practices will be posted and the SWPPP Inspection Contractor shall notify the appropriate personnel of the procedures that are to be followed.

Hazardous Waste:

All hazardous waste materials will be disposed in the manner specified by local or State regulation or by the manufacturer. Site personnel will be instructed in these practices and the SWPPP Inspection Contractor shall notify the appropriate personnel of the practices that are to be followed.

Sanitary Waste:

An approved local sanitary waste management contractor, as required by local regulations, will collect all sanitary waste from the portable units.

Off-Site Vehicle Tracking:

The contractor shall provide a stabilized construction exit/entrance to help reduce vehicle tracking of sediments off-site. The paved streets adjacent to the construction site shall be inspected daily and cleaned as necessary or by the end of the work day or prior to a rain event to remove any excess mud, dirt, or rock tracked from the site. Additional material will be added as necessary. Dump trucks hauling material from the site shall be properly covered with a tarpaulin.

Dust Control:

Contractor will frequently water excavated and fill areas during construction. Gravel will be provided at the temporary entrance/exit areas and staging area.

MAINTENANCE AND INSPECTION PROCEDURES

The contractor/subcontractor (co-permittees) shall be required to maintain all temporary erosion control measures in proper working order, including cleaning, repairing, or replacing them throughout the contract period. The following inspection and maintenance practices will be used to maintain erosion and sediment controls and stabilization measures.

- All control measures will be inspected at least once every seven (7) calendar days.
- All measures will be maintained in good working order. If a repair is necessary, it will be initiated within 24 hours of the report.
- Any built up sediment will be removed from the silt fence/filter sock when it has reached one-half of the height of the fence.
- Silt fence/filter socks/wattle will be inspected for depth of sediment, tears, etc., to see if the fabric is securely attached to the fence posts, and to see that the fence posts are securely fastened in the ground.
- The sediment basin, if present, will be inspected for depth of sediment. Built up sediment will be removed when it reaches 25 percent of the design capacity or at the end of the job.
- Diversion dikes, if present, will be inspected and any breaches will be promptly repaired.
- Temporary and permanent seeding and plantings will be inspected for bare spots, washouts, and healthy growth.
- A maintenance inspection report will be made after each inspection and recorded in the project diary.
- The contractor will be responsible for selecting a "qualified" inspector to conduct the inspections. "Qualified" is defined as a person knowledgeable in the principles and practices of erosion and sediment controls who possesses the skills to assess conditions at the construction site that could impact stormwater quality and to assess the effectiveness of any sediment and erosion control measures selected to control the quality of stormwater discharge from the construction activity.

INVENTORY FOR POLLUTION PREVENTION PLAN

The materials or substances listed below are expected to be present onsite during construction:

- | | |
|-----------------------------|----------------------------|
| • Concrete | • Fertilizers |
| • Detergents | • Petroleum Based Products |
| • Paints (enamel and latex) | • Cleaning Solvents |
| • Metal Studs | • Wood |
| • Concrete | • Masonry Block |
| • Tar | • Roofing Shingles |

SPILL PREVENTION

Material Management Practices

The following are the material management practices that will be used to reduce the risk of spills or other accidental exposure of materials and substances to stormwater runoff.

Good Housekeeping:

- An effort will be made to store only enough product required to do the job.
- All materials stored onsite will be stored in a neat, orderly manner in their appropriate containers and, if possible, under a roof or other enclosure.
- Products will be kept in their original containers with the original manufacturer's label.
- Substances will not be mixed with one another unless recommended by the manufacturer.
- Whenever possible, all of a product will be used up before disposing of the container.
- Manufacturer's recommendations for proper use and disposal will be followed.
- The site superintendent will inspect daily to ensure proper use and disposal of materials onsite.

Hazardous Products:

- Products will be kept in original containers unless they are not resealable.
- Original labels and material safety data will be retained; they contain important product information.
- If surplus product must be disposed of, manufacturers' or local and State recommended methods for proper disposal will be followed.

Product Specific Practices

The following product specific practices will be followed onsite:

Petroleum Products:

All onsite vehicles will be monitored for leaks and receive preventive maintenance to reduce the chance of leakage. Petroleum will be stored in tightly sealed containers that are clearly labeled. Any asphalt substances used onsite will be applied according to the manufacturer's recommendations.

Fertilizers:

Fertilizers used will be applied only in the minimum amounts recommended by the manufacturer. Once applied, fertilizer will be worked into the soil to limit exposure to stormwater. Storage will be in a covered shed. The contents of any partially used bags of fertilizer will be transferred to a sealable plastic bin to avoid spills.

Paints:

All containers will be tightly sealed and stored when not required for use. Excess paint will not be discharged to the storm sewer system but will be properly disposed of according to manufacturers' instructions or State and local regulations.

Concrete Trucks:

Concrete trucks will not be allowed to wash out or discharge surplus concrete or drum wash water on the site, except at the specified containment area or into a properly designed receptacle.

Spill Control Practices

The following practices will be followed for spill prevention and cleanup:

- Manufacturers' recommended methods for spill cleanup shall be followed and site personnel will be made aware of the procedures and the location of the information and cleanup supplies.
- Materials and equipment necessary for spill cleanup will be kept in the material storage area onsite. Equipment and materials will include but not be limited to brooms, dustpans, mops, rags, gloves, goggles, kitty litter, sand, sawdust, and plastic and metal trash containers specifically for this purpose.
- All spills will be cleaned up immediately after discovery
- The spill area will be kept well ventilated and personnel will wear appropriate protective clothing to prevent injury from contact with a hazardous substance.
- Spills of toxic or hazardous material will be reported by the SWPPP Inspection Contractor to the appropriate State or local government agency, regardless of the size as soon as possible but not more than six hours after the onset of the spill. Notifications shall include but are not limited to the Iowa DNR, Local Police Department and/or Sheriff's office. If requested, cleanup coordinator shall provide a written report of the incident particulars to the Iowa DNR within 30 days of the request.
- The spill prevention plan will be adjusted to include measures to prevent this type of spill from reoccurring and how to clean up the spill if there is another one. A description of the spill, what caused it, and the cleanup measures will also be included.
- The SWPPP Inspection Contractor will be the spill prevention and cleanup coordinator, and shall be responsible for notifying local/state agencies and/or writing up incident reports in the event of a spill. They will also designate other site personnel who will receive spill prevention and cleanup training. These individuals will each become responsible for a particular phase of prevention and cleanup. The names of responsible spill personnel will be posted onsite.

NON-STORMWATER DISCHARGES

The following is a list of non-stormwater discharges allowed by the Iowa Department of Natural resources and may occur at the job site under the condition that no pollutants will be allowed to come into contact with the water prior to or after it's discharged from the site:

- Water from fire fighting activities and potable water source fire hydrant/watermain/service flushing.
- Water used to flush vehicles or wash vehicles to prevent off-site tracking of material.
- Air conditioning condensate routine building wash downs excluding detergents.
- Irrigation, uncontaminated groundwater, and spring drainage.
- Foundation or footing drains where flows have not been exposed to solvents.
- Pavement wash waters where spills or leaks of hazardous material has not occurred or after removal of spill material and without detergents.

FINAL STABILIZATION AND NOTICE OF DISCONTINUATION

The stormwater discharge from a construction activity is no longer considered to be a discharge subject to the stormwater permit's requirements when final stabilization has been reached and temporary erosion and sediment controls have been or will be removed. The permitted must submit a Notice of Discontinuation (NOD) to inform the Iowa Department of Natural Resources that stormwater discharge no longer needs to be covered by the general permit.

Final stabilization is defined in the general permit as meaning that all soil disturbing activities at the site have been completed, and that a uniform perennial vegetative cover with a density of 70% for unpaved areas not covered by permanent structures has been established or equivalent permanent stabilization measures have been employed.

The Owner shall retain the original SWPPP and all regulatory correspondence for a period of three (3) years after the completion of final stabilization of the site and the NOD.

The Notice of Discontinuation should be filled out by the Owner and mailed to the following address:

Stormwater Coordinator
Iowa Department of Natural Resources
502 East 9th Street
Des Moines, Iowa 50319-0034

SIGNATORY REQUIREMENTS

All notices of intent, stormwater pollution prevention plans, reports, certifications or information either submitted to the Department of the operator of a large or medium municipal separate storm sewer system, or that this permit requires be maintained by the permitted, shall be signed in accordance with 567--64.3(8) of the Iowa Administrative Code as follows:

64.3(8) *Identities of signatories of operation permit applications.* The person who signs the application for an operation permit shall be:

- *Corporations.* In the case of corporations, a principal executive officer of at least the level of vice-president.
- *Partnership.* In the case of a partnership, a general partner.
- *Sole Proprietorships.* In the case of a sole proprietorship, the proprietor.
- *Public facilities.* In the case of a municipal, state, or other public facility, by either the principal executive officer, or the ranking elected official.
- *Stormwater discharge associated with industrial activity from construction activity.* In the case of a stormwater discharge associated with industrial activity from construction as identified in 40 CFR 122.26(b)(14)(x), either the owner of the site or the general contractor.

CERTIFICATION OF COMPLIANCE WITH FEDERAL, STATE, AND LOCAL REGULATIONS

The stormwater pollution prevention plan reflects local, state and federal requirements for stormwater management and erosion and sediment control, as established by local, state and federal regulatory agencies. To ensure compliance, this plan was prepared in accordance with the Urban Design Standards Manual, Chapter 9 – Erosion Control.

STORMWATER POLLUTION PREVENTION PLAN CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

3/22/2015 | 11:06 PT

Signed:  Date: _____

Hubbell Metropolitan Development Fund I, LLC
6900 Westown Parkway
West Des Moines, Iowa 50266

NOTICE OF INTENT APPLICATION

4/28 10:00 AM

**IOWA DEPARTMENT OF NATURAL RESOURCES
ENVIRONMENTAL PROTECTION DIVISION**

Cashier's Use Only
17-1736 -

NOTICE OF INTENT FOR NPDES COVERAGE UNDER GENERAL PERMIT

No. 1 FOR "STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY"

or

No. 2 FOR "STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY FOR CONSTRUCTION ACTIVITIES"

or

No. 3 FOR "STORM WATER DISCHARGE ASSOCIATED WITH INDUSTRIAL ACTIVITY FOR ASPHALT PLANTS, CONCRETE BATCH PLANTS, ROCK CRUSHING PLANTS, AND CONSTRUCTION SAND AND GRAVEL FACILITIES."

PERMIT INFORMATION

Has this storm water discharge been previously permitted (Check One) ☐ Yes ☒ No

If yes, please list authorization number _____

Under what General Permit are you applying for coverage?

General Permit No. 1 ☐

General Permit No. 2 ☒

General Permit No. 3 ☐

NPDES PERMIT FEE OPTIONS

For coverage under the NPDES General Permit the following fees apply:

- ☒ Annual Permit Fee \$150 (per year) Maximum coverage is one year.
☒ 3-year Permit Fee \$300 Maximum coverage is 3 years.
☐ 4-year Permit Fee \$450 Maximum coverage is 4 years.

Coverage provided by the multi-year permit fees expires no later than the expiration date of the general permit (October 1, 2007).

Checks should be made payable to: Iowa Department of Natural Resources

FACILITY OR PROJECT INFORMATION

Enter the name and full address/location (not mailing address) of the facility or project for which permit coverage is requested.

NAME: Glynn Village Plat 1		STREET ADDRESS OF SITE: Booth Avenue & Grant Parkway	
CITY: Waukec	COUNTY: Dallas	STATE: Iowa	ZIP CODE: 50263

CONTACT INFORMATION. Give name, mailing address and telephone number of a contact person (Attach additional information on separate pages as needed). This will be the address to which all correspondence will be sent and to which all questions regarding your application and compliance with the permit will be directed.

NAME: Hubbell Metropolitan Development Fund I, LLC (Series E)		ADDRESS: 6900 Westown Parkway	
CITY: West Des Moines	STATE: Iowa	ZIP CODE: 50266	TELEPHONE: (515) 243-3228
Check the appropriate box to indicate the legal status of the operator of the facility. <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private <input type="checkbox"/> Other			

SIC CODE* (General Permit No. 1 & 3 Applicants Only)

* SIC code refers to Standard Industrial Classification code number used to classify establishments by type of economic activity.

FACILITY LOCATION OR LOCATION OF CONSTRUCTION SITE

Give the location by 1/4 section location (i.e. NW)/section number/ township/ range.

1/4 SECTION	SECTION	TOWNSHIP	RANGE
NE & NW	5	T78N	R26W

MAIL TO:
STORM WATER COORDINATOR
IOWA DEPARTMENT OF
NATURAL RESOURCES
502 E. 9TH STREET
DES MOINES, IA 50319-0034

OWNER INFORMATION

Enter the name and full address of the owner of the facility.

NAME: Hubbell Metropolitan Development Fund I, LLC (Series E)	ADDRESS: 6900 Westown Parkway
CITY: West Des Moines	STATE: Iowa
ZIP CODE: 50266	TELEPHONE: (515) 243-3228

OUTFALL INFORMATION

Discharge Start Date, i.e., when did/will the site begin operation or 10/1/92, whichever is later: April 2005

Is any storm water monitoring information available describing the concentration of pollutants in storm water discharges? ☐ Yes ☒ No

NOTE: Do not attach any storm water pollutant information as part of this Notice of Intent.

Receiving water (s) to the first uniquely named waterway in Iowa, (e.g., road ditch to unnamed tributary to Mud Creek to South Skunk River):

Un-named Waterway leading to Sugar Creek

Compliance With The Following Conditions:

1. Has the pollution prevention plan been developed prior to the submittal of this Notice of Intent?
2. Will the Storm Water Pollution Prevention Plan comply with approved State (Section 161A.64, Code of Iowa) or local sediment and erosion plans? (for General Permit 2 only)
3. Have two (2) public notices been published for at least one day, one each in two newspapers with the largest circulation in the area where the discharge is located? (new applications only)

Yes	No
X	
X	
X	

GENERAL PERMIT NO. 2 AND GENERAL PERMIT NO. 3 APPLICANTS COMPLETE THIS SECTION.

Description of Project: Single family residential development

For General Permit No. 3 - Is this facility to be moved this year?
☐ Yes ☐ No

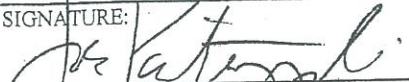
Number of Acres of Disturbed Soil: Approximately 60 acres
(Construction Activities Only)

Estimated Timetable For Activities / Projects, i.e., approximately when did/will the project begin and end: April 2005 begin construction; October 2005 complete site work; Fall 2007 complete home construction with final stabilization

Only the following individuals may sign the certification: owner of site, principal executive officer of at least the level of vice-president of the company owning the site, a general partner of the company owning the site, principal executive officer or ranking elected official of the public entity owning the site, any of the above of the general contracting company for construction sites.

CERTIFICATION

I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified people properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, this information is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME (please print) JOE PIETRZYNSKI	TITLE: DEVELOPMENT MANAGER - AGENT
SIGNATURE: 	DATE: 5/24/2005



DEPARTMENT OF NATURAL RESOURCES

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

JEFFREY R. VONK, DIRECTOR

May 31, 2005

HUBBELL METROPOLITAN DEVELOPMENT FUND I, L.L.C.
6900 WESTOWN PARKWAY
WEST DES MOINES, IA 50266

Re: Authorization of a Storm Water Discharge Associated With Construction Activity
Iowa Department of Natural Resources, NPDES General Permit No.2
DNR Authorization Number: IA - 9433 - 9235
Facility Name and Location: GLYNN VILLAGE PLAT 1, WAUKEE, IA

Dear Storm Water Discharger:

This letter is to acknowledge that a complete Notice of Intent to be covered under Iowa's NPDES Storm Water General Permit No. 2 has been received. Please use the DNR Authorization Number provided above for any future correspondence on this project. By making this Notice of Intent with the DNR, you are committing to meet the terms and conditions in General Permit No. 2. If you do not have a copy of General Permit No. 2 please call (515)281-6782 and request that a copy be sent to you.

In accordance with the terms and conditions in General Permit No. 2, a pollution prevention plan was to have been developed before the Notice of Intent was submitted to the department. The plan is to be implemented at the start of construction and updated accordingly. The pollution prevention plan and other records are to be kept on-site where the storm water discharge occurs. Unless otherwise requested, you do not need to provide a copy to the DNR.

When the construction project has reached final stabilization as defined in the permit, you must submit a Notice of Discontinuation to the DNR (refer to the summary guidance document). Final stabilization is not achieved for residential and commercial developments until all houses and buildings have been constructed and ground surrounding them has been finally stabilized.

If you have questions, please call me at (515)281-7017 or call (515)281-6782 and ask for storm water permit assistance.

Sincerely,

Joseph D. Griffin
Wastewater Section
Environmental Protection Division

Enclosure(s): Contact Information Sheet; Permit Authorization Sheet.

File No. CON 11 - 4 - 1 -- 9433
IDNR Field Office #5



DEPARTMENT OF NATURAL RESOURCES

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

JEFFREY R. VONK, DIRECTOR

DEPARTMENT OF NATURAL RESOURCES
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
NOTICE OF GENERAL PERMIT COVERAGE UNDER
GENERAL PERMIT NO. 2

STORM WATER DISCHARGE ASSOCIATED WITH CONSTRUCTION ACTIVITY

This notice of general permit coverage for a storm water discharge associated with construction activity is issued pursuant to the authority of section 402 (b) of the Clean Water Act (U.S.C. 1342(b)), Iowa Code 455B.174, and subrule 567--64.4(2), Iowa Administrative Code. A Notice of Intent has been filed with the Iowa Department of Natural Resources that this storm water discharge complies with the terms and conditions of NPDES General Permit No. 2. Authorization is hereby issued to discharge storm water associated with industrial activity as defined in Part VIII of the Iowa Department of Natural Resources NPDES General Permit No. 2 in accordance with the terms and conditions set forth in the permit.

Owner:

HUBBELL METROPOLITAN DEVELOPMENT FUND I, L.L.C.
6900 WESTOWN PARKWAY
WEST DES MOINES IA 50266
(515)243-3228

Permit Coverage Issued To:

GLYNN VILLAGE PLAT 1
BOOTH AVENUE & GRANT PARKWAY
in WAUKEE, DALLAS COUNTY
located at

1/4 Section	Section	Township	Range	Latitude			Longitude		
				Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
NE & NW	5	78N	26W						

Coverage Provided Through: 5/31/2008

NPDES Permit Discharge Authorization Number: 9433 - 9235

Discharge Authorization Date: 5/31/2005

Project Description: SINGLE FAMILY RESIDENTIAL DEVELOPMENT.
APPRX: 60 ACRES.

PUBLIC NOTICES

Proof of Publication

Dallas County
State of Iowa SS

1. Stephen R. Whitehead

4120

Publisher of THE PERRY CHIEF, a Newspaper
printed and published at Perry, Dallas County, Iowa
do certify that the attached Notice of Intent
Hubbell Realty Company

_____ was published in said newspaper in
_____ one issue _____ once each week
for _____ 1 consecutive _____ week
commencing February 24, 2005 and
ending February 24, 2005.

Stephen R. Whitehead

Subscribed and sworn to before me by

Stephen R. Whitehead this
24 day of February, 2005.



LORI LYNN LOTT
Commission Number 166761
MY COMM. EXP. 9/30/2007

Lori Lynn Lott

Notary Public in and For
Dallas County, Iowa

Printer's Fee

\$16.09

Public Notice Storm Water Discharge

Public Notice of Storm Water Discharge

Hubbell Realty Company plans to submit a Notice of Intent to the Iowa Department of Natural Resources to be covered under NPDES General Permit, General Permit #2, Stormwater Discharge Associated with Construction.

The storm water discharge will be from Site Grading, Paving & Utilities located in the NW 1/4 and the NE 1/4 of Section 35, T78N, R26W, Dallas County, Waukegan, Iowa.

Storm water will be discharged from a point source and will be discharged to the following streams: Unnamed Waterway to Sugar Creek.

Comments may be submitted to the Storm Water Discharge Coordinator, IOWA DEPARTMENT OF NATURAL RESOURCES, Environmental Protection Division, Henry A. Wallace Building, 502 E 9th Street, Des Moines, Iowa 50319-0034. The public may review the Notice of Intent from 8 a.m. to 4:30 p.m., Monday through Friday, at the above address after the department has received it.

NPDES

4124
NPDES


Proof of Publication

STATE OF IOWA,
Dallas County

I, Greg Kytola, Publisher of the Dallas County News, a weekly newspaper, published in the town of Adel, in the county and state aforesaid, do hereby certify that the attached notice was published in said newspaper for 1 consecutive week(s), commencing on _____, 2005, and ending February 24, 2005.


Publisher

Subscribed and sworn to before me this 24 day of February, 2005.


Notary Public

Printer's Fee \$ 11.61



PUBLIC NOTICE OF STORM WATER DISCHARGE

Hubbell Realty Company plans to submit a Notice of Intent to the Iowa Department of Natural Resources to be covered under NPDES General Permit #2: Stormwater Discharge Associated with Construction.

The storm water discharge will be from Site Grading; Paving & Utilities located in the NW 1/4 and the NE 1/4 of Section 5, T78N; R26W, Dallas County, Waukegan, Iowa.

Storm water will be discharged from 5 point sources and will be discharged to the following streams: Unnamed Waterway to Sugar Creek.

Comments may be submitted to the Storm Water Discharge Coordinator, Iowa Department of Natural Resources, Environmental Protection Division, 900 E. Grand Avenue, Des Moines, IA 50319-0034. The public may review the Notice of Intent from 8 a.m. to 4:30 p.m., Monday through Friday, at the above address after it has been received by the department.

NPDES GENERAL PERMIT NO. 2



STATE OF IOWA

TERRY E. BRANSTAD, GOVERNOR
KIM REYNOLDS, LT. GOVERNOR

DEPARTMENT OF NATURAL RESOURCES
CHUCK GIFF, DIRECTOR

DEPARTMENT OF NATURAL RESOURCES
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
NOTICE OF GENERAL PERMIT COVERAGE UNDER
GENERAL PERMIT NO. 2

STORM WATER DISCHARGE ASSOCIATED WITH CONSTRUCTION ACTIVITY

This notice of general permit coverage for a storm water discharge associated with construction activity is issued pursuant to the authority of section 402 (b) of the Clean Water Act (U.S.C. 1342(b)), Iowa Code 455B.174, and subrule 567--64.4(2), Iowa Administrative Code. A Notice of Intent has been filed with the Iowa Department of Natural Resources that this storm water discharge complies with the terms and conditions of NPDES General Permit No. 2. Authorization is hereby issued to discharge storm water associated with industrial activity as defined in Part VIII of the Iowa Department of Natural Resources NPDES General Permit No. 2 in accordance with the terms and conditions set forth in the permit.

Owner: HUBBELL METROPOLITAN DEVELOPMENT FUND I
6900 WESTOWN PARKWAY
WEST DES MOINES IA 50266
(515)280-2059

Permit Coverage Issued To:

GLYNN VILLAGE PROJECT - CONSTRUCTION
BOOTH AVE. & GRANT PARKWAY
in WAUKEE, DALLAS COUNTY
located at

1/4 Section	Section	Township	Range
NE & NW	5	78N	26W

Coverage Provided Through: 5/31/2017
NPDES Permit Discharge Authorization Number: 9433 - 9235
Discharge Authorization Date: 5/31/2005

Project Description: CONSTRUCTION OF A SINGLE FAMILY RESIDENTIAL
DEVELOPMENT 180 ACRES



STATE OF IOWA

TERRY E. BRANSTAD, GOVERNOR
KIM REYNOLDS, LT. GOVERNOR

DEPARTMENT OF NATURAL RESOURCES
CHUCK GIPP, DIRECTOR

April 9, 2014

NATE ESSER
HUBBELL REALTY COMPANY
6900 WESTOWN PARKWAY
WEST DES MOINES, IA 50266

Re: Acknowledgement of Receipt of Permit Renewal Fee Payment
DNR Authorization Number: IA - 9433 - 9235
Facility Name and Location: GLYNN VILLAGE PROJECT - CONSTRUCTION WAUKEE, IA

Enclosed you will find a revised discharge authorization sheet for your storm water NPDES General Permit. The storm water discharge covered under the general permit has been authorized for additional year(s). The revised date is shown on the lower portion of the authorization sheet following the phrase 'Coverage Provided Through.'

If you have questions, please call me at (515) 725-3403 or email at Mark.Lasnek@dnr.iowa.gov.

Mark Lasnek
NPDES Section

Enclosure: Permit Authorization Sheet

File No. CON 11 - 34 -- 9433
IDNR Field Office # 5

NOTICE OF DISCONTINUATION

Notice of Discontinuation
OF A STORM WATER DISCHARGE
COVERED UNDER IOWA NPDES GENERAL PERMIT NO. 2
FOR CONSTRUCTION ACTIVITIES

Name of the owner or facility to which the storm water discharge general permit coverage was issued.

County: _____

List the complete permit authorization number for the discharge. This number is provided on the bottom of the authorization sheet.

IA- _____ --- _____

List the date the construction site reached final stabilization as defined on the back of this form.

The following certification must be signed in accordance with the signatory requirements of the general permit (see back side).

I certify under penalty of law that disturbed soils at the identified facility have been finally stabilized and temporary erosion and sediment control measures have been removed or will be removed at an appropriate time. I understand that by submitting this Notice of Discontinuation, I am no longer authorized to discharge storm water associated with industrial activity for construction activities by Iowa Department of Natural Resources NPDES General Permit No. 2 and that discharging pollutants from storm water associated with industrial activity to waters of the United States is unlawful under the Clean Water Act where the discharge is not authorized by an NPDES permit.

I further certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.

Name (print)

Title

Signature

Date

Return to:

Storm Water Coordinator
Department of Natural Resources
502 E. 9th Street
Des Moines, IA 50319-0034

Final Stabilization means that all soil disturbing activities at the site have been completed and that a uniform perennial vegetative cover for the area has been established or equivalent stabilization measures have been employed. All building must be completed before the project is considered finally stabilized.

SIGNATORY REQUIREMENTS All Notices of Intent, storm water pollution prevention plans, reports, certifications or information either submitted to the Department or the operator of a large or medium municipal separate storm sewer system, or that this permit requires be maintained by the permittee, shall be signed in accordance with rule 567--64.3(8) of the Iowa Administrative Code as follows:

64.3(8) *Identity of signatories of operation permit applications.* The person who signs the application for an operation permit shall be:

- a. *Corporations.* In the case of corporations, a principal executive officer of at least the level of vice-president.
- b. *Partnerships.* In the case of a partnership, a general partner.
- c. *Sole proprietorships.* In the case of a sole proprietorship, the proprietor.
- d. *Public facilities.* In the case of a municipal, state, or other public facility, by either the principal executive officer, or the ranking elected official.
- e. *Storm water discharge associated with construction activity.* In the case of a storm water discharge associated with industrial activity from construction as identified in 40 CFR 122.26(b)(14)(x), either the owner of the site or the general contractor.

CONSTRUCTION SCHEDULE

Note: This section shall be completed after selection of various contractors. The Inspector shall submit information to the Manager, to the City, and to the Engineer. The Contractor's SWPPP Manager shall be responsible for the revisions and ensuring maintenance of the SWPPP.

SWPPP MANAGERS AND INSPECTORS

Owner's SWPPP Manager:

Telephone:

E-Mail:

Start Date:

Completion Date:

Contact's SWPPP Manager:

Telephone:

E-Mail:

Start Date:

Completion Date:

Contractor's SWPPP Manager:

Telephone:

E-Mail:

Start Date:

Completion Date:

Contractor's Inspector:

Telephone:

E-Mail:

Start Date:

Completion Date:

Note: This section shall be completed after selection of various contractors. The Inspector shall submit information to the Manager, to the City, and to the Engineer. The Contractor's SWPPP Manager shall be responsible for the revisions and ensuring maintenance of the SWPPP.

SWPPP MANAGERS AND INSPECTORS

Owner's SWPPP Manager:

Andrew Hubbell Operations Manager
6900 Westown PKWY
West Des Moines, IA 50266

Telephone:

515-802-5720

E-Mail:

andrew.hubbell@hubbellrealty.com

Start Date:

6/8/15

Completion Date:

Contact's SWPPP Manager:

Nick Newbury Development Inspector
6900 Westown PKWY
West Des Moines, IA 50266

Telephone:

515-608-3296

E-Mail:

Start Date:

6/8/15

Completion Date:

Contractor's SWPPP Manager:

Nick Newbury

Telephone:

515-608-3296

E-Mail:

Start Date:

6/8/15

Completion Date:

Contractor's Inspector:

Nick Newbury

Telephone:

515-608-3296

E-Mail:

nick.newbury@hubbellrealty.com

Start Date:

6/8/15

Completion Date:

PROJECTED CONSTRUCTION SCHEDULE

Initial Preparation of Site: Perimeter silt fence/filter socks and other temporary erosion control installation

Contractor:

Tidy Site Services
1150 SW Brookside Cir
Grimes, IA 50111

Contact: Reid Tamisiea 515-480-1818

Projected Start Date:

6/10/15

Projected Completion Date:

6/10/15

Actual Start Date:

6-10-15

Actual Completion Date:

6-10-15

Initial Grading Operations: Clearing and grubbing, strip and stockpile topsoil

Contractor:

McAninch Corporation
4001 Delaware
Des Moines, IA 50313

Contact: Dan Sullivan 515-267-2500

Projected Start Date:

6/8/15

Projected Completion Date:

6-10-15

Actual Start Date:

6-04-15

Actual Completion Date:

Mass Grading Operations: Rough grading and installation of sediment control

Contractor:

McAninch Corporation

Contact: Dan Sullivan 515-267-2500

Projected Start Date:

6/10/15

Projected Completion Date:

7/31/15

Actual Start Date:

Actual Completion Date:

End of August

2002
2002-2

2002
2002-2

2002 in 2002

PROJECTED CONSTRUCTION SCHEDULE (Continued)

Installation of Underground Utilities: Water Main Construction

Contractor:

McAninch Corporation

Contact: Dan Kruse 515-267-2500

Projected Start Date:

Projected Completion Date:

Actual Start Date:

Actual Completion Date:

11-10-12-16 Stopped in December - weather
5-16-16

Installation of Underground Utilities: Sanitary Sewer Construction

Contractor:

McAninch

Contact: Dan Kruse 515-267-2500

Projected Start Date:

Projected Completion Date:

Actual Start Date:

Actual Completion Date:

October 2015 Stopped in December restart in February
5-16-16 Westown!

Installation of Underground Utilities: Storm Sewer Construction

Contractor:

McAninch

Contact: Dan Kruse 267-2500

Projected Start Date:

Projected Completion Date:

Actual Start Date:

Actual Completion Date:

10-12-16 stopped in december restart in February
5-16-16

2-16-16

2-16-16
2-16-16
2-16-16

2-16-16

PROJECTED CONSTRUCTION SCHEDULE (Continued)

Sub-grade Preparation:

Contractor:

McAninch

Contact: Dan Sullivan

Projected Start Date:

Projected Completion Date:

Actual Start Date:

5-23-16

Actual Completion Date:

5-30-16

Paving Operations:

Contractor:

Alliance Construction

Contact: 515-225-6677

Projected Start Date:

Projected Completion Date:

Actual Start Date:

6-20-16

Actual Completion Date:

7-25-16

Final Backfill and Grading Operations:

Contractor:

McAninch

Contact: Dan Sullivan

Projected Start Date:

Projected Completion Date:

Actual Start Date:

8-1-16

Actual Completion Date:

8-29-16

PROJECTED CONSTRUCTION SCHEDULE (Continued)

Landscaping, Seeding and Final Stabilization: Final seeding, sod placement, temporary erosion control removal

Contractor:

Tidy Site Services

Contact: Reid Tamisiea 515-480-1815

Projected Start Date:

Projected Completion Date:

Actual Start Date:

Actual Completion Date:

8-29-16
9-10-16

Lot Construction: Home construction, commercial site development

Contractor:

Hubbell Homes, third party builders

Contact: Eric Miller 515-779-2265

Projected Start Date:

Projected Completion Date:

Actual Start Date:

Actual Completion Date:

9-

OPERATORS LIST

[illegible]

**CERTIFICATION STATEMENT
FOR
GLYNN VILLAGE - PLAT 10
WAUKEE, IOWA**

Contractor/Subcontractor: McANINCH Corp
Address: 4001 DELAWARE
DSM, IA 50313

Phone Number: 515-267-2500
Date: 6/4/2015

"I certify under penalty of law that I understand the terms and conditions of the general National Pollutant Discharge Elimination System (NPDES) permit that authorized the stormwater discharges associated with industrial activity from the construction site as part of this certification. Further, by my signature, I understand that I am becoming a co-permittee, along with the owner(s) and other contractors and subcontractors signing such certifications, to the Iowa Department of Natural Resources NPDES General Permit No. 2 for "Stormwater Discharge Associated with Industrial Activity for Construction Activities" at the identified site. As a co-permittee, I understand that I, and my company, are legally required under the Clean Water Act and the Code of Iowa, to ensure compliance with the terms and condition of the stormwater pollution prevention plan developed under this NPDES permit and the terms of this NPDES permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Signed:



Title:

P.M. ESTIMATOR

Contractor/Subcontractor Certification Statement
For
Glynn Village Plat 10
Waukee, Iowa

NPDES Permit Authorization Number: 9433-9235

Contractor/Subcontractor: Alliance Construction Group
Address: 3000 SE Grimes Blvd. Ste. 800.
Phone Number: (515) 225-6677
Date: 6/1/2015

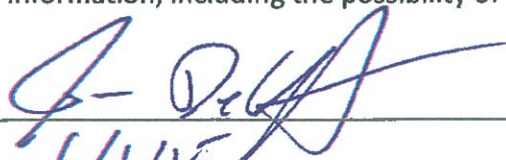
"I certify under penalty of law that I understand the terms and conditions of the general National Pollutant Discharge Elimination System (NPDES) permit that authorized the stormwater discharges associated with the industrial activity from the construction site as part of this certification. Further, by my signature, I understand that I am becoming a co-permittee, along with the owner(s) and other contractors and subcontractors signing such certifications, to the Iowa Department of Natural Resources NPDES General Permit No. 2 for "Stormwater Discharge Associated with Industrial Activity for Construction Activities" at the identified site. As a co-permittee, I understand that I, and my company, are legally required under the Clean Water Act and the Code of Iowa, to ensure compliance with the terms and condition of the stormwater pollution prevention plan developed under this NPDES permit and the terms of this NPDES permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Signed: _____

Date Signed: _____

Title: _____


6/1/15
Owner/Estimator



6900 Westown Parkway West Des Moines, Iowa 50266 www.hubbellrealty.com 515-243-3228 FAX 515-280-2000

CONTRACTOR'S CERTIFICATION STATEMENT

Buyer: Eden Custom Homes, LLC

Seller: Hubbell Metropolitan Development Fund I, LLC (Series E)

Property (Lot # or Local Address or Legal Description): Lots 25-26, Glynn Village Plat 10, an Official Plat, now included in and forming a part of the City of Waukee, Dallas County, Iowa.

Permit Number: IA-9433-9235

Buyer is hereby notified that there exists an NPDES Storm Water Discharge Permit No. 2 (the "General Permit") and a pollution prevention plan for Glynn Village Plat 10, which includes the Property. Buyer acknowledges receipt of the General Permit and pollution prevention plan. Additionally, a copy of the General Permit and pollution prevention plan is located at Seller's offices at 6900 Westown Parkway, West Des Moines, Iowa.

Buyer understands and agrees that from and after the Closing Date for each Lot, Buyer shall become the sole responsible permittee for such Lot with respect to compliance with all terms, provisions, conditions and requirements of the General Permit and the pollution prevention plan.

Additionally, from and after the Closing Date for each Lot, Buyer shall, under all circumstances, prevent the loss, transfer or migration of any soil, silt, hazardous substance or solid waste from or beyond the boundaries of such Lot. At all times from and after the Closing Date for each Lot, Buyer shall have the sole operational control of storm water discharges associated with such Lot. In the event Buyer fails to take all necessary action to prevent the loss, transfer or migration of any soil, silt, sediment, petroleum product, hazardous substance or solid waste from or beyond the boundaries of such Lot, Seller may, but is not required to, take such action, as Seller determines appropriate in its sole discretion, to prevent such losses or the remove such soil, silt, sediment, petroleum product, hazardous substance or solid waste that has migrated or otherwise moved from such Lot to areas beyond the boundaries of such Lot and Buyer shall reimburse Seller for its actual expenses in preventing such losses or removing such soil, silt, sediment, petroleum product, hazardous substance or solid waste, including a charge equal to 2.35 times the hourly salary of any employee of Seller or its agent who supervises such activity, plus an administrative charge of \$250.00 for each such occurrence. Buyer shall pay such amounts to Seller upon demand. Any amount due from Buyer to Seller that is not paid within five (5) days of such demand shall bear interest at an annual rate of twelve percent (12%) per annum until paid in full.

Buyer shall protect, defend, indemnify and hold harmless Seller and its members or partners and their officers, directors, shareholders, members, partners or employees from any and all damages, claims liabilities, fines, penalties, cleanup costs and/or attorneys and consultant fees caused by, or in any manner related to: (1) any discharges from the Property, and/or (2) any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to the Property after the date of sale of each Lot to Buyer. Buyer hereby releases, waives and otherwise discharges any and all claims that Buyer may assert against Seller relating, in any manner, to any discharges from each Lot and/or any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to such Lot after the date of sale of such Lot to Buyer.

Eden Custom Homes, LLC

By: 

Title: Matthew Peterson, President

Address: 8972 NW 72nd Place, Johnston, IA 50131

Telephone: 515-208-2537

Date: August 29, 2016

PLEASE EXECUTE FOUR ORIGINALS, ONE EACH FOR BUYER, SELLER, IOWA DNR, AND CITY/COUNTY



6900 Westown Parkway West Des Moines, Iowa 50266 www.hubbellrealty.com 515-243-3228 FAX 515-280-2000

CONTRACTOR'S CERTIFICATION STATEMENT

Buyer: Keystone Homes, LLC

Seller: Hubbell Metropolitan Development Fund I, LLC (Series E)

Property (Lot # or Local Address or Legal Description): Lot 99, Glynn Village Plat 10, an Official Plat, now included in and forming a part of the City of Waukee, Dallas County, Iowa.

Permit Number: IA-9433-9235

Buyer is hereby notified that there exists an NPDES Storm Water Discharge Permit No. 2 (the "General Permit") and a pollution prevention plan for Glynn Village Plat 10, which includes the Property. Buyer acknowledges receipt of the General Permit and pollution prevention plan. Additionally, a copy of the General Permit and pollution prevention plan is located at Seller's offices at 6900 Westown Parkway, West Des Moines, Iowa.

Buyer understands and agrees that from and after the Closing Date for each Lot, Buyer shall become the sole responsible permittee for such Lot with respect to compliance with all terms, provisions, conditions and requirements of the General Permit and the pollution prevention plan.

Additionally, from and after the Closing Date for each Lot, Buyer shall, under all circumstances, prevent the loss, transfer or migration of any soil, silt, hazardous substance or solid waste from or beyond the boundaries of such Lot. At all times from and after the Closing Date for each Lot, Buyer shall have the sole operational control of storm water discharges associated with such Lot. In the event Buyer fails to take all necessary action to prevent the loss, transfer or migration of any soil, silt, sediment, petroleum product, hazardous substance or solid waste from or beyond the boundaries of such Lot, Seller may, but is not required to, take such action, as Seller determines appropriate in its sole discretion, to prevent such losses or the remove such soil, silt, sediment, petroleum product, hazardous substance or solid waste that has migrated or otherwise moved from such Lot to areas beyond the boundaries of such Lot and Buyer shall reimburse Seller for its actual expenses in preventing such losses or removing such soil, silt, sediment, petroleum product, hazardous substance or solid waste, including a charge equal to 2.35 times the hourly salary of any employee of Seller or its agent who supervises such activity, plus an administrative charge of \$250.00 for each such occurrence. Buyer shall pay such amounts to Seller upon demand. Any amount due from Buyer to Seller that is not paid within five (5) days of such demand shall bear interest at an annual rate of twelve percent (12%) per annum until paid in full.

Buyer shall protect, defend, indemnify and hold harmless Seller and its members or partners and their officers, directors, shareholders, members, partners or employees from any and all damages, claims liabilities, fines, penalties, cleanup costs and/or attorneys and consultant fees caused by, or in any manner related to: (1) any discharges from the Property, and/or (2) any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to the Property after the date of sale of each Lot to Buyer. Buyer hereby releases, waives and otherwise discharges any and all claims that Buyer may assert against Seller relating, in any manner, to any discharges from each Lot and/or any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to such Lot after the date of sale of such Lot to Buyer.

Keystone Homes, LLC

By: 

Title: Jocelyn Lippold Fink, Member Manager

Address: 1645 NW 102nd Street, Clive, IA 50325

Telephone: 515-240-1179

Date: August 29, 2016

PLEASE EXECUTE FOUR ORIGINALS, ONE EACH FOR BUYER, SELLER, IOWA DNR, AND CITY/COUNTY



6900 Westown Parkway West Des Moines, Iowa 50266 www.hubbellrealty.com 515-243-3228

FAX 515-280-2000

CONTRACTOR'S CERTIFICATION STATEMENT

Buyer: Hubbell Homes, L.C.

Seller: Hubbell Metropolitan Development Fund I, LLC (Series E)

Property (Lot # or Local Address or Legal Description): Lots 41,42,44,80,82,83,84,85,109, Glynn Village Plat 10, an Official Plat, now included in and forming a part of the City of Waukee, Dallas County, Iowa.

Permit Number: IA-9433-9235

Buyer is hereby notified that there exists an NPDES Storm Water Discharge Permit No. 2 (the "General Permit") and a pollution prevention plan for Glynn Village Plat 10, which includes the Property. Buyer acknowledges receipt of the General Permit and pollution prevention plan. Additionally, a copy of the General Permit and pollution prevention plan is located at Seller's offices at 6900 Westown Parkway, West Des Moines, Iowa.

Buyer understands and agrees that from and after the Closing Date for each Lot, Buyer shall become the sole responsible permittee for such Lot with respect to compliance with all terms, provisions, conditions and requirements of the General Permit and the pollution prevention plan.

Additionally, from and after the Closing Date for each Lot, Buyer shall, under all circumstances, prevent the loss, transfer or migration of any soil, silt, hazardous substance or solid waste from or beyond the boundaries of such Lot. At all times from and after the Closing Date for each Lot, Buyer shall have the sole operational control of storm water discharges associated with such Lot. In the event Buyer fails to take all necessary action to prevent the loss, transfer or migration of any soil, silt, sediment, petroleum product, hazardous substance or solid waste from or beyond the boundaries of such Lot, Seller may, but is not required to, take such action, as Seller determines appropriate in its sole discretion, to prevent such losses or the remove such soil, silt, sediment, petroleum product, hazardous substance or solid waste that has migrated or otherwise moved from such Lot to areas beyond the boundaries of such Lot and Buyer shall reimburse Seller for its actual expenses in preventing such losses or removing such soil, silt, sediment, petroleum product, hazardous substance or solid waste, including a charge equal to 2.35 times the hourly salary of any employee of Seller or its agent who supervises such activity, plus an administrative charge of \$250.00 for each such occurrence. Buyer shall pay such amounts to Seller upon demand. Any amount due from Buyer to Seller that is not paid within five (5) days of such demand shall bear interest at an annual rate of twelve percent (12%) per annum until paid in full.

Buyer shall protect, defend, indemnify and hold harmless Seller and its members or partners and their officers, directors, shareholders, members, partners or employees from any and all damages, claims liabilities, fines, penalties, cleanup costs and/or attorneys and consultant fees caused by, or in any manner related to: (1) any discharges from the Property, and/or (2) any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to the Property after the date of sale of each Lot to Buyer. Buyer hereby releases, waives and otherwise discharges any and all claims that Buyer may assert against Seller relating, in any manner, to any discharges from each Lot and/or any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to such Lot after the date of sale of such Lot to Buyer.

Hubbell Homes, L.C.

By: Hubbell Realty Company, Manager

BY: Ashley Aust
Ashley Aust, Assistant Secretary

Address: 6900 Westown Parkway, West Des Moines, IA 50266

Telephone: 243-3228

Date: September 14, 2016

PLEASE EXECUTE FOUR ORIGINALS, ONE EACH FOR BUYER, SELLER, IOWA DNR, AND CITY/COUNTY



6900 Westown Parkway West Des Moines, Iowa 50266 www.hubbellrealty.com 515-243-3228 FAX 515-280-2000

CONTRACTOR'S CERTIFICATION STATEMENT

Buyer: Keystone Homes, LLC

Seller: Hubbell Metropolitan Development Fund I, LLC (Series E)

Property (Lot # or Local Address or Legal Description): Lots 133, 134, and 135, Glynn Village Plat 10, an Official Plat, now included in and forming a part of the City of Waukee, Dallas County, Iowa.

Permit Number: IA-9433-9235

Buyer is hereby notified that there exists an NPDES Storm Water Discharge Permit No. 2 (the "General Permit") and a pollution prevention plan for Glynn Village Plat 10, which includes the Property. Buyer acknowledges receipt of the General Permit and pollution prevention plan. Additionally, a copy of the General Permit and pollution prevention plan is located at Seller's offices at 6900 Westown Parkway, West Des Moines, Iowa.

Buyer understands and agrees that from and after the Closing Date for each Lot, Buyer shall become the sole responsible permittee for such Lot with respect to compliance with all terms, provisions, conditions and requirements of the General Permit and the pollution prevention plan.

Additionally, from and after the Closing Date for each Lot, Buyer shall, under all circumstances, prevent the loss, transfer or migration of any soil, silt, hazardous substance or solid waste from or beyond the boundaries of such Lot. At all times from and after the Closing Date for each Lot, Buyer shall have the sole operational control of storm water discharges associated with such Lot. In the event Buyer fails to take all necessary action to prevent the loss, transfer or migration of any soil, silt, sediment, petroleum product, hazardous substance or solid waste from or beyond the boundaries of such Lot, Seller may, but is not required to, take such action, as Seller determines appropriate in its sole discretion, to prevent such losses or the remove such soil, silt, sediment, petroleum product, hazardous substance or solid waste that has migrated or otherwise moved from such Lot to areas beyond the boundaries of such Lot and Buyer shall reimburse Seller for its actual expenses in preventing such losses or removing such soil, silt, sediment, petroleum product, hazardous substance or solid waste, including a charge equal to 2.35 times the hourly salary of any employee of Seller or its agent who supervises such activity, plus an administrative charge of \$250.00 for each such occurrence. Buyer shall pay such amounts to Seller upon demand. Any amount due from Buyer to Seller that is not paid within five (5) days of such demand shall bear interest at an annual rate of twelve percent (12%) per annum until paid in full.

Buyer shall protect, defend, indemnify and hold harmless Seller and its members or partners and their officers, directors, shareholders, members, partners or employees from any and all damages, claims liabilities, fines, penalties, cleanup costs and/or attorneys and consultant fees caused by, or in any manner related to: (1) any discharges from the Property, and/or (2) any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to the Property after the date of sale of each Lot to Buyer. Buyer hereby releases, waives and otherwise discharges any and all claims that Buyer may assert against Seller relating, in any manner, to any discharges from each Lot and/or any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to such Lot after the date of sale of such Lot to Buyer.

Keystone Homes, LLC

By: 

Title: Jocelyn Lippold Fink, Member Manager

Address: 1645 NW 102nd Street, Clive, IA 50325

Telephone: 515-240-1179

Date: September 29, 2016

PLEASE EXECUTE FOUR ORIGINALS, ONE EACH FOR BUYER, SELLER, IOWA DNR, AND CITY/COUNTY



Buyer: Savannah Homes, Inc.

Seller: Hubbell Metropolitan Development Fund I, LLC (Series E)

Property (Lot # or Local Address or Legal Description): Lots 10-11, Glynn Village Plat 10, an Official Plat, now included in and forming a part of the City of Waukee, Dallas County, Iowa.

Permit Number: IA-9433-9235

Buyer is hereby notified that there exists an NPDES Storm Water Discharge Permit No. 2 (the "General Permit") and a pollution prevention plan for Glynn Village Plat 10, which includes the Property. Buyer acknowledges receipt of the General Permit and pollution prevention plan. Additionally, a copy of the General Permit and pollution prevention plan is located at Seller's offices at 6900 Westown Parkway, West Des Moines, Iowa.

Buyer understands and agrees that from and after the Closing Date for each Lot, Buyer shall become the sole responsible permittee for such Lot with respect to compliance with all terms, provisions, conditions and requirements of the General Permit and the pollution prevention plan.

Additionally, from and after the Closing Date for each Lot, Buyer shall, under all circumstances, prevent the loss, transfer or migration of any soil, silt, hazardous substance or solid waste from or beyond the boundaries of such Lot. At all times from and after the Closing Date for each Lot, Buyer shall have the sole operational control of storm water discharges associated with such Lot. In the event Buyer fails to take all necessary action to prevent the loss, transfer or migration of any soil, silt, sediment, petroleum product, hazardous substance or solid waste from or beyond the boundaries of such Lot, Seller may, but is not required to, take such action, as Seller determines appropriate in its sole discretion, to prevent such losses or the remove such soil, silt, sediment, petroleum product, hazardous substance or solid waste that has migrated or otherwise moved from such Lot to areas beyond the boundaries of such Lot and Buyer shall reimburse Seller for its actual expenses in preventing such losses or removing such soil, silt, sediment, petroleum product, hazardous substance or solid waste, including a charge equal to 2.35 times the hourly salary of any employee of Seller or its agent who supervises such activity, plus an administrative charge of \$250.00 for each such occurrence. Buyer shall pay such amounts to Seller upon demand. Any amount due from Buyer to Seller that is not paid within five (5) days of such demand shall bear interest at an annual rate of twelve percent (12%) per annum until paid in full.

Buyer shall protect, defend, indemnify and hold harmless Seller and its members or partners and their officers, directors, shareholders, members, partners or employees from any and all damages, claims liabilities, fines, penalties, cleanup costs and/or attorneys and consultant fees caused by, or in any manner related to: (1) any discharges from the Property, and/or (2) any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to the Property after the date of sale of each Lot to Buyer. Buyer hereby releases, waives and otherwise discharges any and all claims that Buyer may assert against Seller relating, in any manner, to any discharges from each Lot and/or any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to such Lot after the date of sale of such Lot to Buyer.

Savannah Homes, Inc.

By: 
Title: Ted A. Grob, President

Address: 800 S. 50th Street, Suite 101, West Des Moines, IA 50265
Telephone: 515-221-2333

Date: October 6, 2016

PLEASE EXECUTE FOUR ORIGINALS, ONE EACH FOR BUYER, SELLER, IOWA DNR, AND CITY/COUNTY

CONTRACTOR'S CERTIFICATION STATEMENT

Buyer: Hubbell Homes, L.C.

Seller: Hubbell Metropolitan Development Fund I, LLC (Series E)

Property (Lot # or Local Address or Legal Description): Lot 43, Glynn Village Plat 10, an Official Plat, now included in and forming a part of the City of Waukee, Dallas County, Iowa.

Permit Number: IA-9433-9235

Buyer is hereby notified that there exists an NPDES Storm Water Discharge Permit No. 2 (the "General Permit") and a pollution prevention plan for Glynn Village Plat 10, which includes the Property. Buyer acknowledges receipt of the General Permit and pollution prevention plan. Additionally, a copy of the General Permit and pollution prevention plan is located at Seller's offices at 6900 Westown Parkway, West Des Moines, Iowa.

Buyer understands and agrees that from and after the Closing Date for each Lot, Buyer shall become the sole responsible permittee for such Lot with respect to compliance with all terms, provisions, conditions and requirements of the General Permit and the pollution prevention plan.

Additionally, from and after the Closing Date for each Lot, Buyer shall, under all circumstances, prevent the loss, transfer or migration of any soil, silt, hazardous substance or solid waste from or beyond the boundaries of such Lot. At all times from and after the Closing Date for each Lot, Buyer shall have the sole operational control of storm water discharges associated with such Lot. In the event Buyer fails to take all necessary action to prevent the loss, transfer or migration of any soil, silt, sediment, petroleum product, hazardous substance or solid waste from or beyond the boundaries of such Lot, Seller may, but is not required to, take such action, as Seller determines appropriate in its sole discretion, to prevent such losses or the remove such soil, silt, sediment, petroleum product, hazardous substance or solid waste that has migrated or otherwise moved from such Lot to areas beyond the boundaries of such Lot and Buyer shall reimburse Seller for its actual expenses in preventing such losses or removing such soil, silt, sediment, petroleum product, hazardous substance or solid waste, including a charge equal to 2.35 times the hourly salary of any employee of Seller or its agent who supervises such activity, plus an administrative charge of \$250.00 for each such occurrence. Buyer shall pay such amounts to Seller upon demand. Any amount due from Buyer to Seller that is not paid within five (5) days of such demand shall bear interest at an annual rate of twelve percent (12%) per annum until paid in full.

Buyer shall protect, defend, indemnify and hold harmless Seller and its members or partners and their officers, directors, shareholders, members, partners or employees from any and all damages, claims liabilities, fines, penalties, cleanup costs and/or attorneys and consultant fees caused by, or in any manner related to: (1) any discharges from the Property, and/or (2) any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to the Property after the date of sale of each Lot to Buyer. Buyer hereby releases, waives and otherwise discharges any and all claims that Buyer may assert against Seller relating, in any manner, to any discharges from each Lot and/or any alleged violation of the General Permit, the pollution prevention plan or any NPDES or storm water discharge rule or regulation applicable to such Lot after the date of sale of such Lot to Buyer.

Hubbell Homes, L.C.

By: Hubbell Realty Company, Manager

BY: Ashley Aust
Ashley Aust, Secretary

Address: **6900 Westown Parkway, West Des Moines, IA 50266**
Telephone: **276-2349**

Date: October 7, 2016

PLEASE EXECUTE FOUR ORIGINALS, ONE EACH FOR BUYER, SELLER, IOWA DNR, AND CITY/COUNTY

EROSION AND SEDIMENT CONTROL INSPECTION REPORT

Project: _____ Date of Inspection: _____

Prime Contractor: _____ Permit No: _____

Inspector: _____ Project No: _____

Reason for Inspection: ☐ Weekly ☐ Rainfall Event (____ in.) ☐ Other _____

EROSION AND SEDIMENT CONTROL INSPECTION

Area Inspected: _____

Inspection of Best Management Practices:

BMP	Control Practice Effective			Maintenance/Modification Required			BMP	Control Practice Effective			Maintenance/Modification Required		
	Y	N	N/A	Y	N	N/A		Y	N	N/A	Y	N	N/A
Silt Fencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stockpile Stabilization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ditch Checks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mulching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rip Rap	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Erosion Matting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inlet Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Temporary Seeding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drainage Swales	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Permanent Seeding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Construction Site Exits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sodding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filter Socks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grading Practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INSPECTION COMMENTS/RECOMMENDATIONS

Note: Any 'Control Practice Effective' box checked 'N' or 'Maintenance/Modification Required' box checked 'Y' must have comments, recommended improvements, and date implemented. Any modifications must be sketched, described, dated, and initialed on the drawing included with the Pollution Prevention Plan.

ITEM	COMMENTS/RECOMMENDED IMPROVEMENTS	DATE IMPLEMENTED
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

☐ See reverse side for sketches or additional comments/recommendations

CERTIFICATION

Copy to: ☐ Onsite Pollution Prevention Plan ☐ Owner ☐ Project Engineer ☐ Project Observer

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations"

Signature of Inspector

REGULATORY CORRESPONDENCE



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 10-7-2016


Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Wauke, IA Dallas County

Describe present phase of construction		Finishing Natives, paving on Westown		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 10/6 10pm	Storm Duration (hrs):	3 approximate rainfall(inches) 0.06
Weather at time of this inspection?		49 degrees partly cloudy		
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	end of day as necessary
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

Mcaninch still working on westown. Removed several swale checks to install pipe. Ordered new silt fence/filter sock for next week from Tidy Site Services. Tidy Site is finishing prairie seeding should be done by next week.

Observation Report Certification Statement	Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.		Date: 10-7-2016
	Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 9-30-2016


Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukeet, IA Dallas County

Describe present phase of construction		Pipe on Westown, Homes on plat 10		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 9/24 8pm	Storm Duration (hrs): 12	approximate rainfall(inches): 2.25
Weather at time of this inspection?		73 degrees drizzle		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	end of day as necessary
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

Par is done installing power, gas is also done being installed. Ordered to have tidy site services oversee all disturbed areas by utility install. Several new houses on Waddell Way being dug. Hubbell Homes has erosion sock on site.

Observation Report Certification Statement		Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.			Date: 9-30-2016
		Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 9-23-2016


Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukee, IA Dallas County

Describe present phase of construction		Pipe on Westown, Homes on plat 10		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 9/23 8am	Storm Duration (hrs):	1 approximate rainfall(inches) 0.02
Weather at time of this inspection?		73 degrees light rain		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	end of day as necessary
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

Installed sock around beehives-westown job. Tidy Site cleaned access road for westown residents. Swale checks along westown installed by tidy Site services.

Observation Report Certification Statement	Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.		Date: 9-23-2016
	Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 9-16-2016


Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukee, IA Dallas County

Describe present phase of construction		Pipe on Westtown, Homes on plat 10		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 9/15 9pm	Storm Duration (hrs):	9 approximate rainfall(inches) 2.13
Weather at time of this inspection?		72 degrees overcast		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	end of day as necessary
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

Remarks

Hydroseed coming in well on hillside borrow area north and west of sugar creek culvert. Streets on plat 10 were swept 9/10.

Observation Report Certification Statement		Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.			Date: 9-16-2016
		Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 9-9-2016


Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukee, IA Dallas County

Describe present phase of construction		Pipe on Westown, Homes on plat 10		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 9/7 12pm	Storm Duration (hrs):	6 approximate rainfall(inches) 1.18
Weather at time of this inspection?		79 degrees cloudy		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	end of day as necessary
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

Tidy Site Services hydroseeded hillside north of westown construction in borrow area northwest of sugar creek crossing. Also installed silt fence and silt sock along disturbed area by creek.

Observation Report Certification Statement		Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.			Date: 9-9-2016
		Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 9-2-2016


Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukee, IA Dallas County

Describe present phase of construction		Grading on Westtown, Homes on plat 10		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 8/29 3pm	Storm Duration (hrs):	2 approximate rainfall(inches) 2
Weather at time of this inspection?		72 degrees sunny		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	end of day as necessary
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

Met with Mcaninch about installing silt fence/erosion sock by creek in disturbed areas. Par still working on power in plat 10, will overseed disturbed areas once power is complete.

Observation Report Certification Statement		Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.			Date: 9-2-2016
		Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 8-26-2016


Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukee, IA Dallas County

Describe present phase of construction		backfill finished-seeding respread areas, punchlist		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 8/24 2am	Storm Duration (hrs):	18 approximate rainfall(inches) 0.7
Weather at time of this inspection?		72 degrees overcast		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	end of day as necessary
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

Tidy Site Services started seeding respread areas with temp erosion control mix and natives in outlots/swales. Mcaninch working on punchlist from city.

Observation Report Certification Statement		Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.			Date: 8-26-2016
		Development Inspector:	515-608-3296

**SOILS REPORT
(NRCS)**

SOILS REPORT
(Terracon)



Certification of Completion of IDNR General Permit #2 Topsoil Preservation Requirement

I hereby certify that the topsoil preservation requirements of the Iowa Department of Natural

Resources General Permit No. 2, 9433-9235 (IA DNR Authorization Number)

Part IV.D.2.A.(2).(c). for Glynn Village Plat 8 (PROJECT NAME)

Glynn Village Plat 8 Warrior Lane and Dillon (PROJECT, ADDRESS) Waukeee, Dallas County

have been met on 9/5/14 (DATE)

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations".

Hubbell Metropolitan Development Fund 1, LLC (Series E)

BY: HUBBELL REACTY COMPANY, Managing member

Joe PIETRUSZYNSKI, VICE PRESIDENT

Print Name

General Permit No. 2 Holders Signature

VICE PRESIDENT

Title

Date

9/3/2014

Glynn Village plat 8 SWPPP Amendment

In the reference to the note(s) found on the Glynn Village Plat 8- Initial startup storm water pollution prevention erosion control sheet:

"Type 1 turf reinforcement mat at bottom of swale with temporary check dams over infiltration rock trench. Spacing of check dams to meet SUDAS specifications Figure 9040.6."

The plan is not to use a type 1 turf reinforcement mat (ex. P-300) in all of the swales mentioned on the plan, unless necessary. Currently we are temp seeding the swales with very positive results, and we will native seed those areas later this Fall. The type 1 matting does not allow for solid seed-to-ground contact, and also prevents early growth if laid over native seeding. If weather complications make these options obsolete, we will then employ matting (RECP) to ensure proper stabilization. We also fully intend to use check dams (silt fences) according to the SWPPP. If there are any questions or concerns, please contact Andrew Hubbell or Nick Newbury with the information below.

Sincerely,



Andrew Hubbell, Hubbell Land Development, ICCSPPI, CPESC-IT

515-802-5720

Andrew.hubbell@hubbellrealty.com

Nick Newbury, Hubbell Site Inspections, ICCSPPI



515-608-3296

Nick.newbury@hubbellrealty.com



DEPARTMENT OF THE ARMY
CORPS OF ENGINEERS, ROCK ISLAND DISTRICT
PO BOX 2004 CLOCK TOWER BUILDING
ROCK ISLAND, ILLINOIS 61204-2004

REPLY TO
ATTENTION OF

April 3, 2014

Operations Division

SUBJECT: CEMVR-OD-P-2014-0410

Mr. Joe Pietruszynski
Hubbell Metropolitan Development Fund 1, LLC
6900 Westown Parkway
West Des Moines, Iowa 50266

Dear Mr. Pietruszynski:

We have completed review of your permit application, submitted by Mr. Chad Billings, P.E., Engineering Resource Group, Inc., concerning the proposed Glynn Village Plat 8 project involving construction of a storm water management facility basin/structure and a wetland dike. The project is located in Section 5, Township 78 North, Range 26 West, City of Waukee, Dallas County, Iowa.

According to the plans provided and subsequent conversations/emails, tree removal will be minimized. Livestock grazing is anticipated to continue on adjacent grassland. Fencing will be installed or relocated to exclude livestock from the stormwater basin and wetland sites when construction commences. The area remaining between the storm water management facility basin and wetland structures, and the development, will be open green space to provide vegetative buffer. Plans may include establishing prairie in the open green space.

The plans also include a riprapped drainage channel outlet into the perennial stream from the residential development.

The intermittent tributary stream downstream of the toe of the existing farm pond structure, and the perennial tributary stream, are determined to be Waters of the United States under jurisdiction of Section 404 of the Clean Water Act (33 U.S.C. 1344).

The existing farm pond is determined to not be jurisdictional water. In accordance with 33 CFR 323.4, the construction of farm ponds does not require a Department of the Army Permit. It appears the pond was constructed at the head of the jurisdictional tributary channel, and there are no jurisdictional waters existing upstream of the pond. Therefore no jurisdictional tributary channel will be recaptured with removal of the farm pond for construction of the storm water management facility basin and structure.

A Preliminary Jurisdictional Determination Form is enclosed for your review. Preliminary Jurisdictional Determinations are not appealable. You may request an Approved Jurisdictional Determination and provide additional information for our consideration. The 'Explanation of Preliminary and Approved Jurisdictional Determinations' provides more information. If this jurisdictional determination is acceptable to you, please sign, date, and return one copy to this office to my attention.

Construction of the storm water management facility basin/structure and the wetland dike, and construction of the riprap drainage channel outlet, are covered under Nationwide Permit 43, 'Stormwater Management Facilities', as described in the Federal Register/Vol.77, No. 34/ dated Tuesday, February 21, 2012.

A printout of the Federal Register is enclosed which includes the nationwide permits and permit conditions. You must meet the General Conditions for the nationwide permits, which are also included in the Federal Register Notice.

The Iowa Department of Natural Resources has issued State Section 401 Water Quality Certification, No. 14-D-049-03-09-S, dated April 2, 2014, with 8 General Conditions. You are required to comply with these conditions. A copy is enclosed for your reference.

We have determined the project will result in no effect on federally listed threatened or endangered species.

You should have all required federal, state, and local approvals prior to commencing work. A Floodplain Development Permit may be required from the Iowa Department of Natural Resources (IDNR) for your project.

The decisions regarding this action are based on information found in the administrative record which documents the District's decision-making process, the basis for the decision, and the final decision.

This verification is valid until March 18, 2017, unless the nationwide permit is modified, reissued or revoked. It is your responsibility to remain informed of changes to the nationwide permit program. We will issue a public notice announcing any changes if and when they occur. Furthermore, if you commence or are under contract to commence this activity before the date the nationwide permit is modified or revoked, you will have twelve months from this date to complete your activity under the present terms and conditions of this nationwide permit.

If the activity is not commenced or under contract within this period, you must immediately notify this office to determine the need for further approval or re-verification.

Please contact our office if the project plans change and there are different impacts caused by dredged or fill material into Corps' regulated waters. This may change your Department of the Army Section 404 authorization.

You are required to complete and return the enclosed "Completed Work Certification" form upon completion of this project, in accordance with General Condition No. 30 of the nationwide permits (page 10286 in the enclosed Federal Register).

We have appreciated your patience and cooperation during the processing of your permit application.

The Rock Island District Regulatory Branch is committed to providing quality and timely service to our customers. In an effort to improve customer service, please take a moment to complete the enclosed postage-paid postcard and mail it to this office, or go to our Customer Service Survey found on our web site at <http://per2.nwp.usace.army.mil/survey.html>. (Be sure to select "Rock Island District" under the area entitled: Which Corps office did you deal with?)

Should you have any questions, please contact me by letter, telephone 309/794-5377,
or email: marlyn.w.schafer@usace.army.mil

Sincerely,



Marlyn Schafer
Project Manager
Regulatory Branch

When the structures or work authorized by this nationwide permit are still in existence at the time the property is transferred, the terms and conditions of this nationwide permit, including any special conditions, will continue to be binding on the new owner(s) of the property. To validate the transfer of this nationwide permit and the associated liabilities associated with compliance with its terms and conditions, have the transferee sign and date below.

Transferee

Date

Enclosures

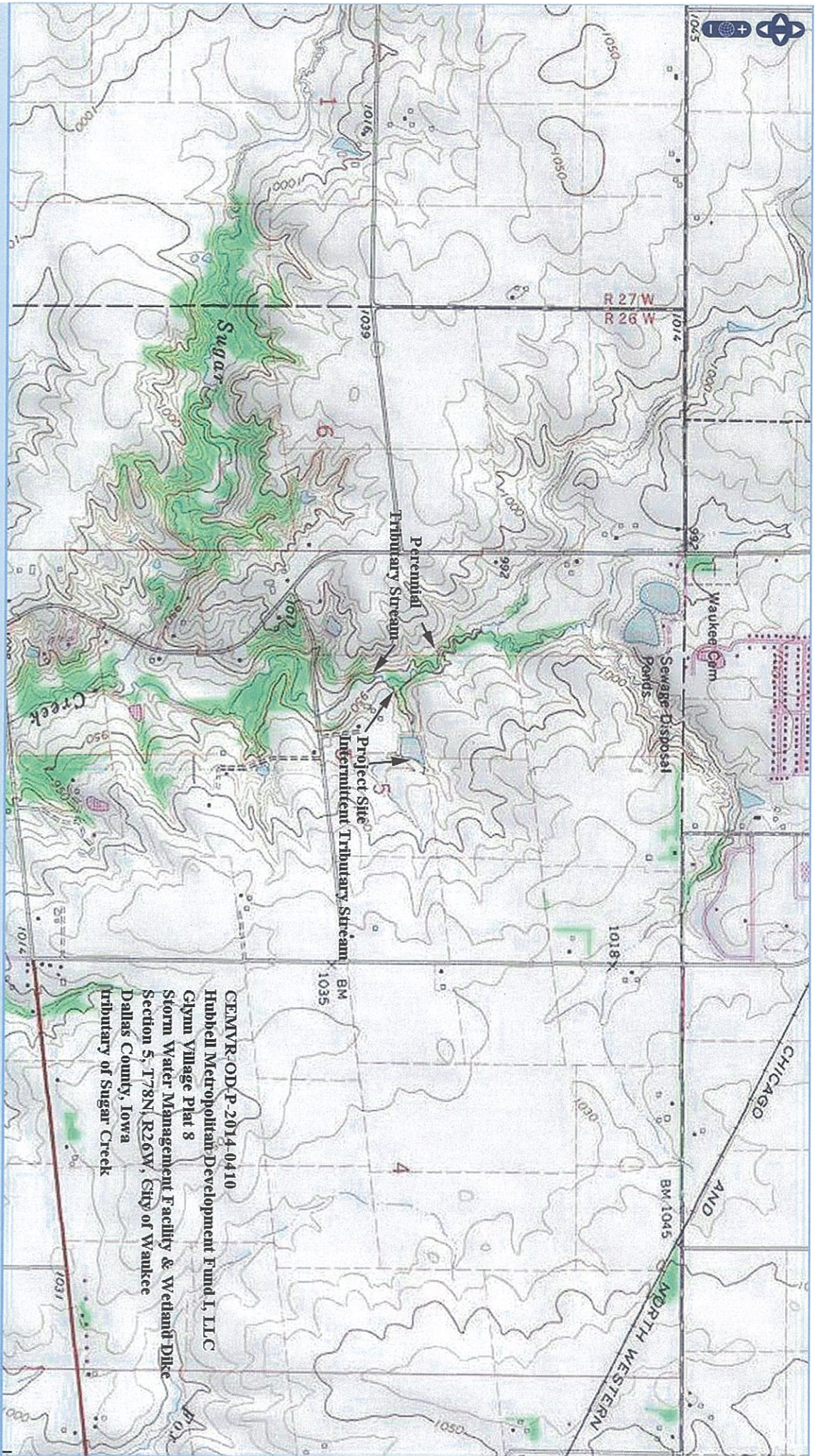
Copies Furnished (w/enclosures):

Mr. Chad Billings, P.E.
Engineering Resource Group, Inc.
2413 Grand Avenue
Des Moines, Iowa 50312

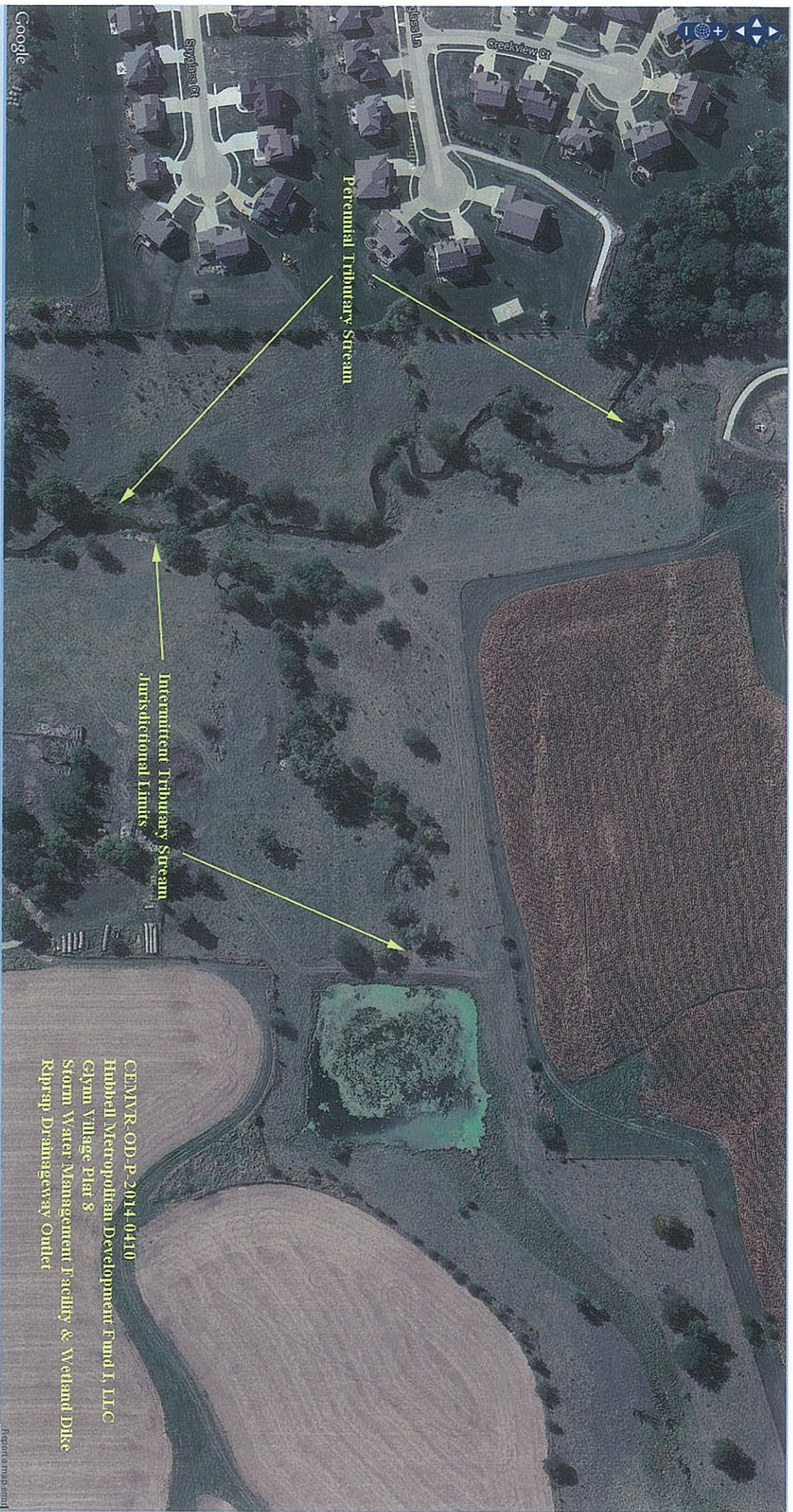
City of Waukee
Development Services Department
230 West Hickman Road
Waukee, Iowa 50263

Mr. Kelly Stone
Iowa Department of Natural Resources
Water Resources Section
Wallace State Office Building
502 East 9th Street
Des Moines, Iowa 50319

Ms. Christine Schwake
Iowa Department of Natural Resources
Water Resources Section - Water Quality
Wallace State Office Building
502 East 9th Street
Des Moines, Iowa 50319



CEMVR-OD-P-2014-0410
Hubbell Metropolitan Development Fund I, LLC
Glynn Village Plat 8
Storm Water Management Facility & Wetland Dike
Section 5, T78N, R26W, City of Waukec
Dallas County, Iowa



CEMVR-OD-P-2014-0410
Hubbell Metropolitan Development Fund I, LLC
Glynn Village Plat 8
Storm Water Management Facility & Wetland Dike
Riprap Drainageway Outlet

Map Ready

RI AR Off - SV Off - OV Off - TR Off - CS - Dist - Area - Rathburn - 10450953.77594, 50999983.29069 | WAD83 / UTM zone 18N

PRELIMINARY JURISDICTIONAL DETERMINATION FORM

This preliminary JD finds that there "may be" waters of the United States on the subject project site, and identifies all aquatic features on the site that could be affected by the proposed activity, based on the following information:

District Office	Rock Island District	File/ORM #	CEMVR-OD-P-2014-0410	PJD Date:	Apr 3, 2014
State	IO	City/County	Wauke / Dallas	Name/ Address of Person Requesting PJD	Joe Pietruszynski Hubbell Metropolitan Dev. Fund 1, LLC 6900 Westown Parkway West Des Moines, IA 50266
Nearest Waterbody:	tributary of Sugar Creek				
Location: TRS, LatLong or UTM:	Section 5, T78N, R26W				
Identify (Estimate) Amount of Waters in the Review Area:				Name of Any Water Bodies Tidal: _____	
Non-Wetland Waters:				on the Site Identified as	
2100 linear ft 5+ width 0.60 acres Stream Flow: N/A				Section 10 Waters: Non-Tidal: _____	
Wetlands: _____ acre(s) Cowardin Class: Riverine				<input checked="" type="checkbox"/> Office (Desk) Determination <input type="checkbox"/> Field Determination: _____ Date of Field Trip: _____	

SUPPORTING DATA: Data reviewed for preliminary JD (check all that apply - checked items should be included in case file and, where checked and requested, appropriately reference sources below):

- ☒ Maps, plans, plots or plat submitted by or on behalf of the applicant/consultant: _____
- ☐ Data sheets prepared/submitted by or on behalf of the applicant/consultant.
 - ☐ Office concurs with data sheets/delineation report.
 - ☐ Office does not concur with data sheets/delineation report.
- ☐ Data sheets prepared by the Corps
- ☐ Corps navigable waters' study: _____
- ☒ U.S. Geological Survey Hydrologic Atlas:
 - ☐ USGS NHD data.
 - ☒ USGS 8 and 12 digit HUC maps.
- ☒ U.S. Geological Survey map(s). Cite quad name: IA-WAUKEE
- ☒ USDA Natural Resources Conservation Service Soil Survey. Citation: Dallas County Soil Survey-Web Soil Survey
- ☒ National wetlands inventory map(s). Cite name: IA-WAUKEE
- ☐ State/Local wetland inventory map(s): _____
- ☐ FEMA/FIRM maps: _____
- ☐ 100-year Floodplain Elevation is: _____
- ☒ Photographs: ☒ Aerial (Name & Date): ORM2-GIS, MS Bing, Google Earh
 - ☐ Other (Name & Date): _____
- ☐ Previous determination(s). File no. and date of response letter: _____
- ☐ Other information (please specify): _____

IMPORTANT NOTE: The information recorded on this form has not necessarily been verified by the Corps and should not be relied upon for later jurisdictional determinations.

Marilyn W. Schaefer 4-3-14
Signature and Date of Regulatory Project Manager
(REQUIRED)

Signature and Date of Person Requesting Preliminary JD
(REQUIRED, unless obtaining the signature is impracticable)

EXPLANATION OF PRELIMINARY AND APPROVED JURISDICTIONAL DETERMINATIONS:

1. The Corps of Engineers believes that there may be jurisdictional waters of the United States on the subject site, and the permit applicant or other affected party who requested this preliminary JD is hereby advised of his or her option to request and obtain an approved jurisdictional determination (JD) for that site. Nevertheless, the permit applicant or other person who requested this preliminary JD has declined to exercise the option to obtain an approved JD in this instance and at this time.

2. In any circumstance where a permit applicant obtains an individual permit, or a Nationwide General Permit (NWP) or other general permit verification requiring "preconstruction notification" (PCN), or requests verification for a non-reporting NWP or other general permit, and the permit applicant has not requested an approved JD for the activity, the permit applicant is hereby made aware of the following: (1) the permit applicant has elected to seek a permit authorization based on a preliminary JD, which does not make an official determination of jurisdictional waters; (2) that the applicant has the option to request an approved JD before accepting the terms and conditions of the permit authorization, and that basing a permit authorization on an approved JD could possibly result in less compensatory mitigation being required or different special conditions; (3) that the applicant has the right to request an individual permit rather than accepting the terms and conditions of the NWP or other general permit authorization; (4) that the applicant can accept a permit authorization and thereby agree to comply with all the terms and conditions of that permit, including whatever mitigation requirements the Corps has determined to be necessary; (5) that undertaking any activity in reliance upon the subject permit authorization without requesting an approved JD constitutes the applicant's acceptance of the use of the preliminary JD, but that either form of JD will be processed as soon as is practicable; (6) accepting a permit authorization (e.g., signing a proffered individual permit) or undertaking any activity in reliance on any form of Corps permit authorization based on a preliminary JD constitutes agreement that all wetlands and other water bodies on the site affected in any way by that activity are jurisdictional waters of the United States, and precludes any challenge to such jurisdiction in any administrative or judicial compliance or enforcement action, or in any administrative appeal or in any Federal court; and (7) whether the applicant elects to use either an approved JD or a preliminary JD, that JD will be processed as soon as is practicable. Further, an approved JD, a proffered individual permit (and all terms and conditions contained therein), or individual permit denial can be administratively appealed pursuant to 33 C.F.R. Part 331, and that in any administrative appeal, jurisdictional issues can be raised (see 33 C.F.R. 331.5(a)(2)). If, during that administrative appeal, it becomes necessary to make an official determination whether CWA jurisdiction exists over a site, or to provide an official delineation of jurisdictional waters on the site, the Corps will provide an approved JD to accomplish that result, as soon as is practicable.

PRELIMINARY JURISDICTIONAL DETERMINATION FORM

This preliminary JD finds that there "may be" waters of the United States on the subject project site, and identifies all aquatic features on the site that could be affected by the proposed activity, based on the following information:

Appendix A - Sites

District Office	Rock Island District	File/ORM #	CEMVR-OD-P-2014-0410	PJD Date:	Apr 3, 2014
State	IO	City/County	Waukeg / Dallas	Person Requesting PJD	Hubbell Metro. Dev. Fund 1 LLC

Site Number	Latitude	Longitude	Cowardin Class	Est. Amount of Aquatic Resource in Review Area	Class of Aquatic Resource
Int.	41.59056	-93.87822	Riverine	900 L.F.	Non-RPW
Per.	41.59079	-93.87979	Riverine	1200 L.F.	RPW

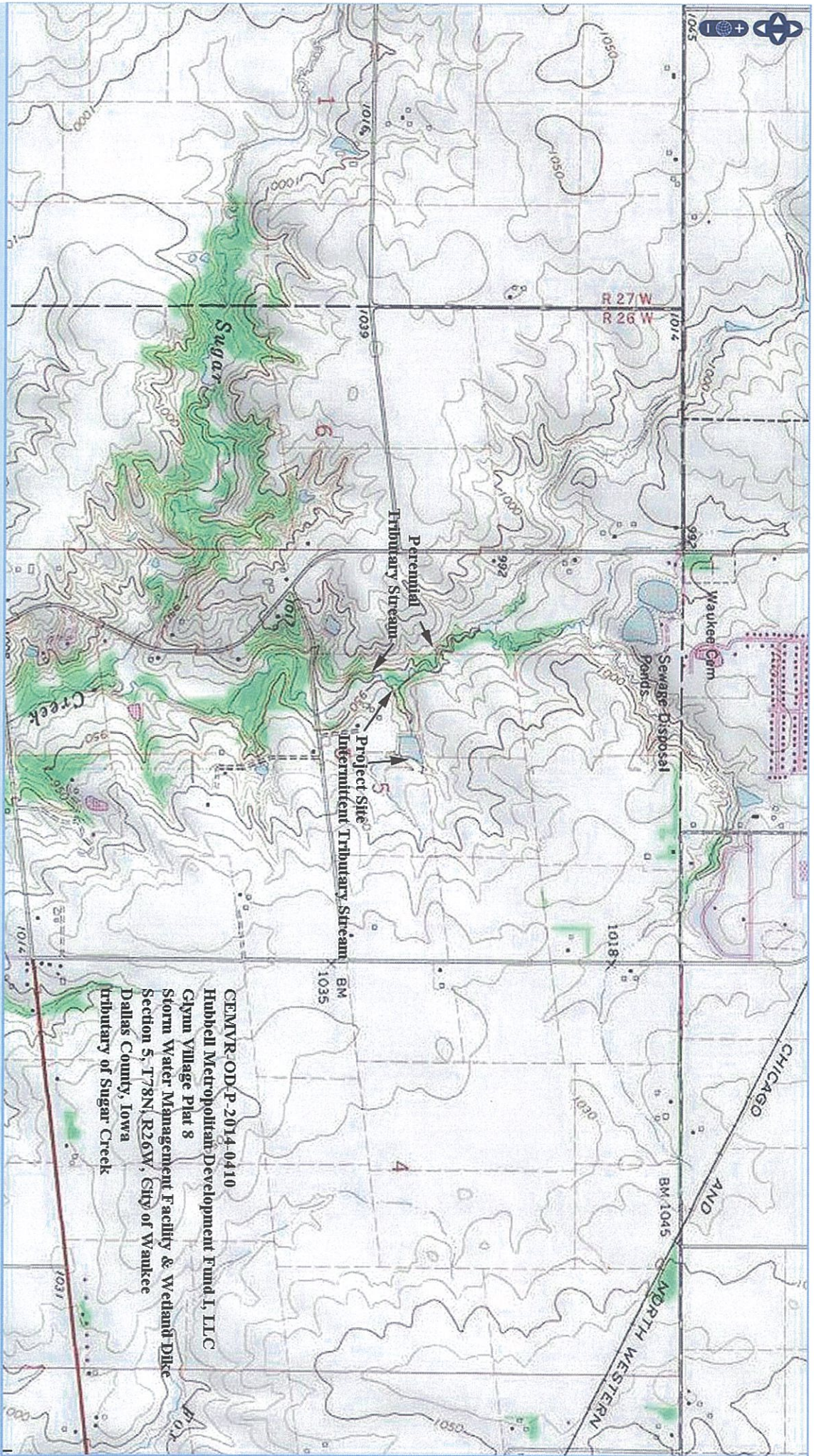
Notes:

RPW: Relatively Permanent Water - Unnamed perennial flowing tributary stream to Sugar Creek.

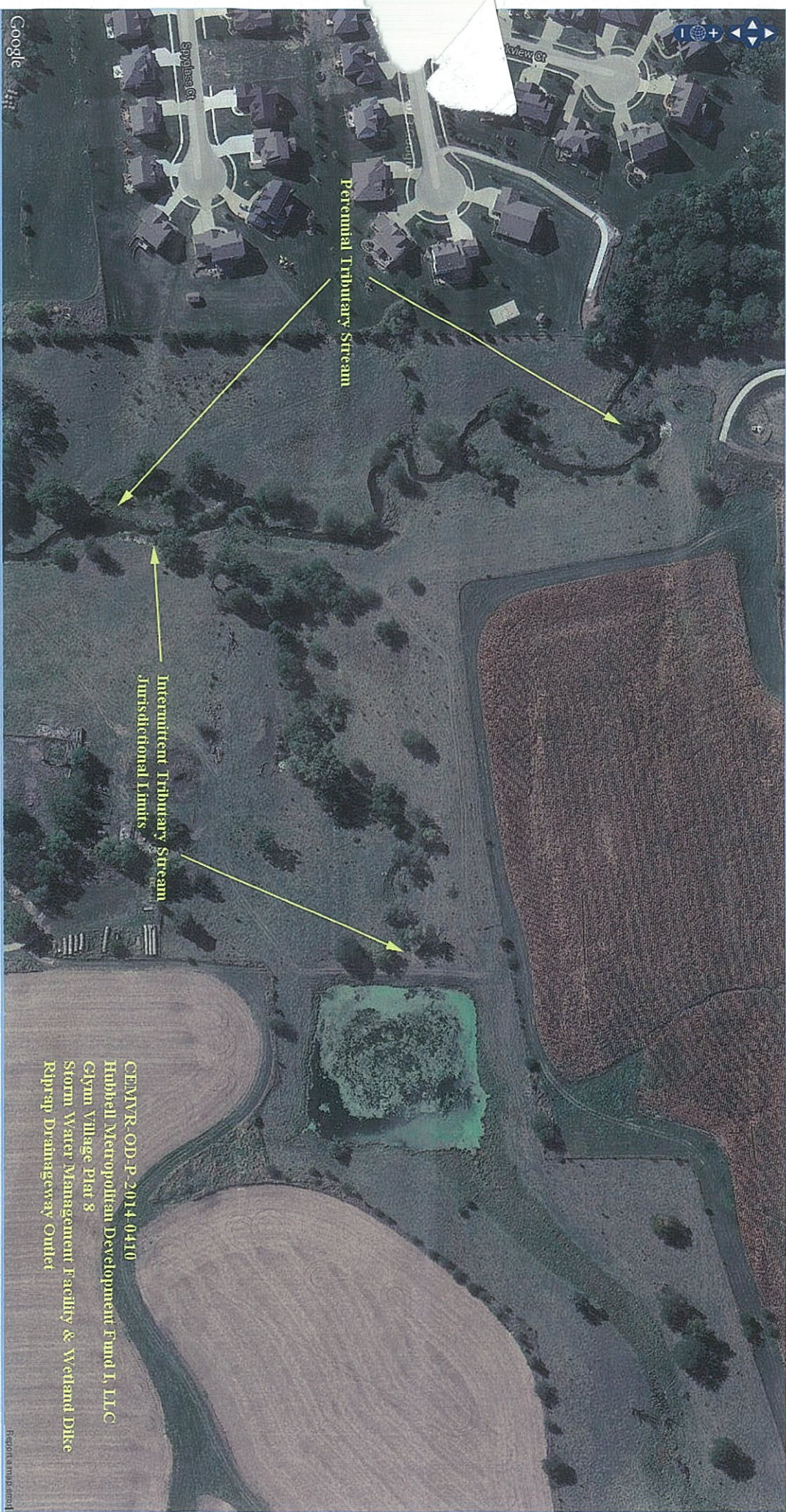
Non-RPW: Non Relatively Permanent Water - Intermittent flowing stream to perennial tributary.

The upstream jurisdictional limit of the intermittent flowing stream channel is at the toe of the existing farm pond.

The existing farm pond is determined to not be jurisdictional water and the pond/structure appear to have been constructed at the head of the jurisdictional tributary stream channel. No jurisdictional waters exist upstream of the pond. Therefore, no jurisdictional waters will be recaptured with removal of the farm pond.



CEMVR-OD-P-2014-0410
Hubbell Metropolitan Development Fund I, LLC
Clynn Village Plat 8
Storm Water Management Facility & Wetland Dike
Section 5, T78N, R26W, City of Waukeet
Dallas County, Iowa
tributary of Sugar Creek



CENVR-OD-P-2014-0410
Hubbell Metropolitan Development Fund I, LLC
Glynn Village Plat 8
Storm Water Management Facility & Wetland Dike
Riprap Drainageway Outlet

PRELIMINARY JURISDICTIONAL DETERMINATION FORM

This preliminary JD finds that there "may be" waters of the United States on the subject project site, and identifies all aquatic features on the site that could be affected by the proposed activity, based on the following information:

District Office	Rock Island District	File/ORM #	CEMVR-OD-P-2014-0410	PJD Date:	Apr 3, 2014
State	IO	City/County	Wauke / Dallas	Name/ Address of Person Requesting PJD	Joe Pietruszynski Hubbell Metropolitan Dev. Fund 1, LLC 6900 Westown Parkway West Des Moines, IA 50266
Nearest Waterbody:	tributary of Sugar Creek				
Location: TRS, LatLong or UTM:	Section 5, T78N, R26W				
Identify (Estimate) Amount of Waters in the Review Area:	Name of Any Water Bodies on the Site Identified as		Tidal:		
Non-Wetland Waters:	Stream Flow:		Section 10 Waters:		Non-Tidal:
2100 linear ft	5+ width	0.60 acres	N/A		
Wetlands:	acre(s)	Cowardin Class:	Riverine		
			<input checked="" type="checkbox"/> Office (Desk) Determination		
			<input type="checkbox"/> Field Determination:		Date of Field Trip:

SUPPORTING DATA: Data reviewed for preliminary JD (check all that apply - checked items should be included in case file and, where checked and requested, appropriately reference sources below):

- ☒ Maps, plans, plots or plat submitted by or on behalf of the applicant/consultant: [redacted]
- ☐ Data sheets prepared/submitted by or on behalf of the applicant/consultant.
 - ☐ Office concurs with data sheets/delineation report.
 - ☐ Office does not concur with data sheets/delineation report.
- ☐ Data sheets prepared by the Corps
- ☐ Corps navigable waters' study: [redacted]
- ☒ U.S. Geological Survey Hydrologic Atlas:
 - ☐ USGS NHD data.
 - ☒ USGS 8 and 12 digit HUC maps.
- ☒ U.S. Geological Survey map(s). Cite quad name: IA-WAUKEE
- ☒ USDA Natural Resources Conservation Service Soil Survey. Citation: Dallas County Soil Survey-Web Soil Survey
- ☒ National wetlands inventory map(s). Cite name: IA-WAUKEE
- ☐ State/Local wetland inventory map(s): [redacted]
- ☐ FEMA/FIRM maps: [redacted]
- ☐ 100-year Floodplain Elevation is: [redacted]
- ☒ Photographs: ☒ Aerial (Name & Date): ORM2-GIS, MS Bing, Google Earh
- ☐ Other (Name & Date): [redacted]
- ☐ Previous determination(s). File no. and date of response letter: [redacted]
- ☐ Other information (please specify): [redacted]

IMPORTANT NOTE: The information recorded on this form has not necessarily been verified by the Corps and should not be relied upon for later jurisdictional determinations.

Marilyn W. Schopf 4-3-14
Signature and Date of Regulatory Project Manager
(REQUIRED)

Signature and Date of Person Requesting Preliminary JD
(REQUIRED, unless obtaining the signature is impracticable)

EXPLANATION OF PRELIMINARY AND APPROVED JURISDICTIONAL DETERMINATIONS:

1. The Corps of Engineers believes that there may be jurisdictional waters of the United States on the subject site, and the permit applicant or other affected party who requested this preliminary JD is hereby advised of his or her option to request and obtain an approved jurisdictional determination (JD) for that site. Nevertheless, the permit applicant or other person who requested this preliminary JD has declined to exercise the option to obtain an approved JD in this instance and at this time.

2. In any circumstance where a permit applicant obtains an individual permit, or a Nationwide General Permit (NWP) or other general permit verification requiring "preconstruction notification" (PCN), or requests verification for a non-reporting NWP or other general permit, and the permit applicant has not requested an approved JD for the activity, the permit applicant is hereby made aware of the following: (1) the permit applicant has elected to seek a permit authorization based on a preliminary JD, which does not make an official determination of jurisdictional waters; (2) that the applicant has the option to request an approved JD before accepting the terms and conditions of the permit authorization, and that basing a permit authorization on an approved JD could possibly result in less compensatory mitigation being required or different special conditions; (3) that the applicant has the right to request an individual permit rather than accepting the terms and conditions of the NWP or other general permit authorization; (4) that the applicant can accept a permit authorization and thereby agree to comply with all the terms and conditions of that permit, including whatever mitigation requirements the Corps has determined to be necessary; (5) that undertaking any activity in reliance upon the subject permit authorization without requesting an approved JD constitutes the applicant's acceptance of the use of the preliminary JD, but that either form of JD will be processed as soon as is practicable; (6) accepting a permit authorization (e.g., signing a proffered individual permit) or undertaking any activity in reliance on any form of Corps permit authorization based on a preliminary JD constitutes agreement that all wetlands and other water bodies on the site affected in any way by that activity are jurisdictional waters of the United States, and precludes any challenge to such jurisdiction in any administrative or judicial compliance or enforcement action, or in any administrative appeal or in any Federal court; and (7) whether the applicant elects to use either an approved JD or a preliminary JD, that JD will be processed as soon as is practicable. Further, an approved JD, a proffered individual permit (and all terms and conditions contained therein), or individual permit denial can be administratively appealed pursuant to 33 C.F.R. Part 331, and that in any administrative appeal, jurisdictional issues can be raised (see 33 C.F.R. 331.5(a)(2)). If, during that administrative appeal, it becomes necessary to make an official determination whether CWA jurisdiction exists over a site, or to provide an official delineation of jurisdictional waters on the site, the Corps will provide an approved JD to accomplish that result, as soon as is practicable.

PRELIMINARY JURISDICTIONAL DETERMINATION FORM

This preliminary JD finds that there "may be" waters of the United States on the subject project site, and identifies all aquatic features on the site that could be affected by the proposed activity, based on the following information:

Appendix A - Sites

District Office File/ORM # PJD Date:
State City/County Person Requesting PJD

Site Number	Latitude	Longitude	Cowardin Class	Est. Amount of Aquatic Resource in Review Area	Class of Aquatic Resource
Int.	41.59056	-93.87822	Riverine	900 L.F.	Non-RPW
Per.	41.59079	-93.87979	Riverine	1200 L.F.	RPW

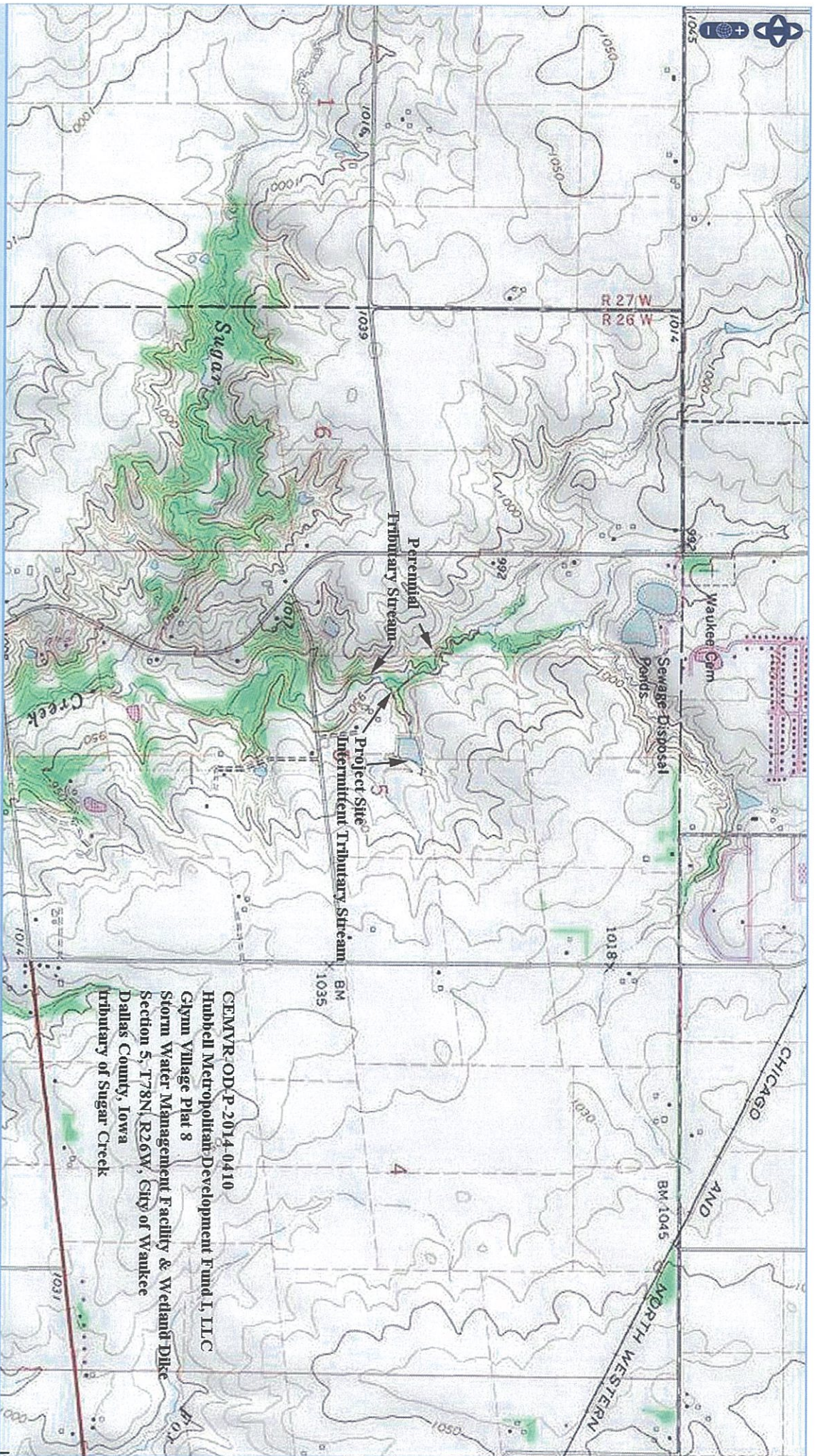
Notes:

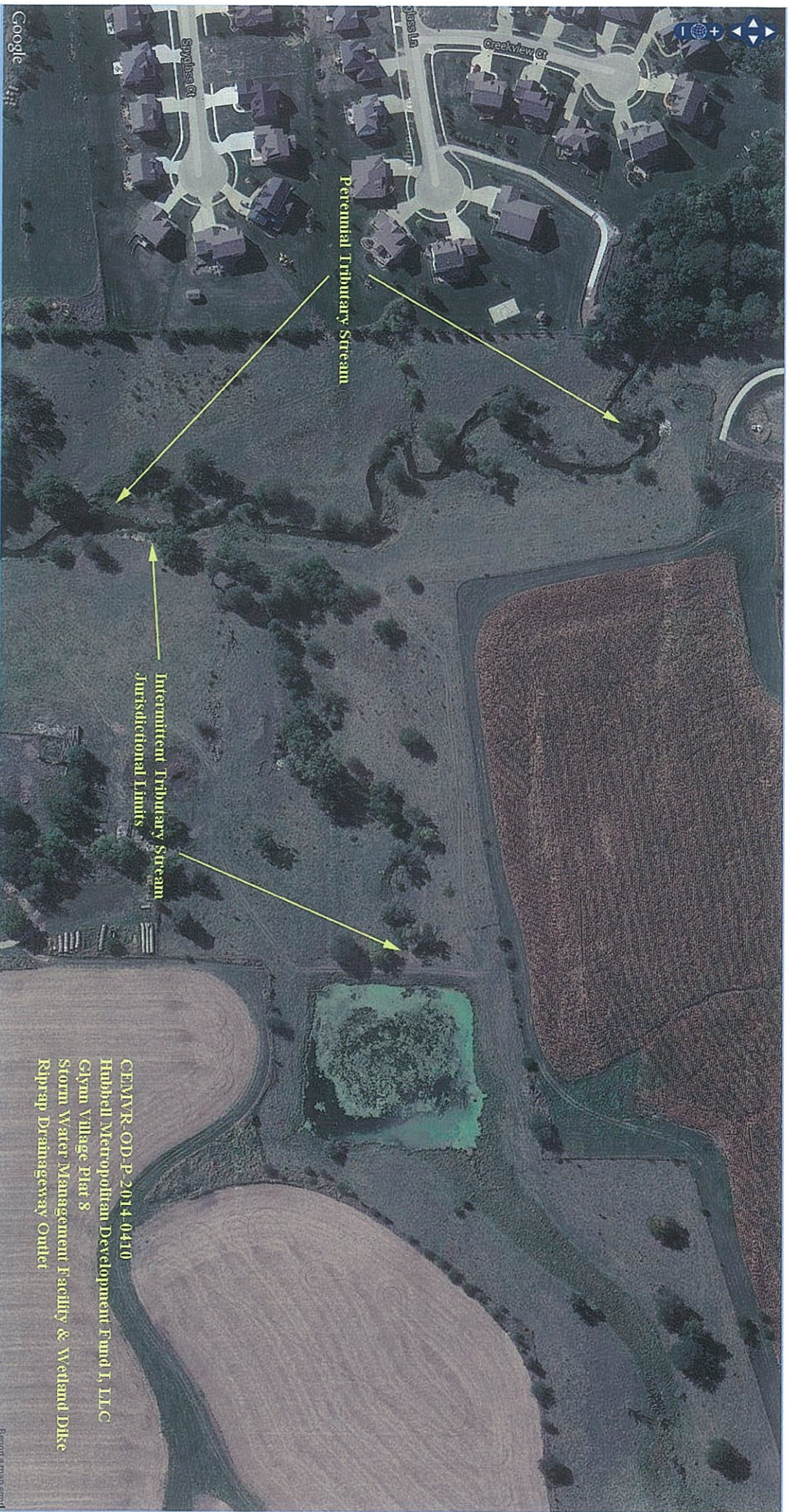
RPW: Relatively Permanent Water - Unnamed perennial flowing tributary stream to Sugar Creek.

Non-RPW: Non Relatively Permanent Water - Intermittent flowing stream to perennial tributary.

The upstream jurisdictional limit of the intermittent flowing stream channel is at the toe of the existing farm pond.

The existing farm pond is determined to not be jurisdictional water and the pond/structure appear to have been constructed at the head of the jurisdictional tributary stream channel. No jurisdictional waters exist upstream of the pond. Therefore, no jurisdictional waters will be recaptured with removal of the farm pond.





CEMVR-OD-P-2014-0410
Hubbell Metropolitan Development Fund I, LLC
Glynn Village Plat 8
Storm Water Management Facility & Wetland Dike
Riprap Drainage Outlet

February 19, 2003

Hubbell Realty Company
6900 Westown Parkway
West Des Moines, Iowa 50266

Terracon

600 Southwest 7th Street, Suite M
Des Moines, Iowa 50309
(515) 244-3184 Fax: (515) 244-5249

Attention: Mr. Mark Siegfried

Re: Geotechnical Engineering Report
Proposed Subdivision
Broderick Farms Property
Waukee, Iowa
Terracon Project No. 08045011-01

Dear Mr. Siegfried:

A subsurface exploration for the proposed subdivision on the Broderick property in Waukee, Iowa has been completed. Fifteen (15) soil borings extending to depths of approximately 15 to 16 feet below the existing ground surface were drilled across the project site. Individual boring logs and a boring location diagram are included with this report.

The purposes of this report are to describe the subsurface conditions encountered in the borings, present the test data, and provide preliminary engineering discussions regarding the design and construction of site utilities, pavements and shallow foundation systems for residential and light commercial construction.

It should be noted that a total of 17 borings are eventually planned on this parcel. However, two of the staked boring locations (Borings 4 and 13) were not accessible to our truck-mounted drill rig on February 6. These two remaining borings will be completed, and the results forwarded under separate cover.

PROJECT DESCRIPTION

We understand the project will consist of the construction of a new subdivision at the above-referenced parcel. The subdivision is expected to contain a mix of commercial and residential areas, with the commercial areas generally located to the north and east. The total area of the subdivision is about 290 acres.

Specific grading information is not currently available. However, Engineering Resource Group forwarded a preliminary topographic plan of the site to Terracon. Based on this site plan, it is assumed that cut areas will generally be located in the northern and eastern portions of the subdivision. Alternately, fill areas would generally be expected along the west edge of the subdivision, and in the native drainage ways.

Arizona ■ Arkansas ■ California ■ Colorado ■ Georgia ■ Idaho ■ Illinois ■ Iowa ■ Kansas ■ Kentucky ■ Minnesota ■ Missouri
Montana ■ Nebraska ■ Nevada ■ New Mexico ■ North Carolina ■ Oklahoma ■ Tennessee ■ Texas ■ Utah ■ Wisconsin ■ Wyoming

EXPLORATION PROCEDURES

Field Exploration

The soil boring locations were laid out on the site by Engineering Resource Group (ERG). ERG numbered the boring locations which do not include B-1 and B-2. A diagram indicating the approximate boring locations is attached. The ground surface elevations indicated on the boring logs were reported by Engineering Resource Group, and have been rounded to the nearest 1 foot.

The borings were drilled with a truck-mounted rotary-drilling rig using continuous flight augers to advance the boreholes. Representative samples were obtained using thin-walled tube and split-barrel sampling procedures. In the thin-walled tube sampling procedure, a thin-walled, seamless steel tube with a sharp cutting edge is pushed hydraulically into the ground to obtain relatively undisturbed samples of cohesive or moderately cohesive soils. In the split-barrel sampling procedure, a standard 2-inch O.D. split-barrel sampling spoon is driven into the ground with an automatic 140-pound hammer falling a distance of 30 inches. The number of blows required to advance the sampling spoon the last 12 inches of a normal 18-inch penetration is recorded as the standard penetration resistance value. These values are indicated on the boring logs at the depths of occurrence. The samples were sealed and transported to the laboratory for testing and classification.

Field logs of each boring were prepared by the drill crew. These logs included a record of the materials encountered during drilling as well as the driller's interpretation of the subsurface conditions between samples. The boring logs included with this report represent an interpretation of the field logs and include modifications based on laboratory observation and tests of the samples.

Laboratory Testing

Representative samples of the soils were tested for water content, and density tests were performed on selected thin-walled samples. Hand penetrometer tests were performed on most of the cohesive samples to provide an estimate of the strength and consistency of the soil sample. Atterberg limits tests were also performed on selected samples to provide a quantitative measure of soil plasticity and to aid in classification. Results of the laboratory tests are provided on the boring logs.

Descriptive classifications of the soils indicated on the boring logs are in accordance with the enclosed General Notes and the Unified Soil Classification System. Also shown are estimated Unified Soil Classification Symbols. A brief description of this classification system is attached to

this report. All classification was by visual-manual procedures and was performed by experienced personnel.

SITE DESCRIPTION

The project site is located on the south side of University Avenue and west of "V" Avenue in Wauke, Iowa. A farmstead and pond are located in the south-central portion of the site.

When the borings were drilled, the project site was open, with ground surfacing consisting of either grass or plowed fields. Drainage ways bound the west edge of the property, and the ground surface generally slopes downward to the west, to these drainage ways.

Engineering Resource Group provided a preliminary topographic diagram of the site to Terracon. This diagram indicates that the highest portion of the site is to the northeast, at elevations of about 1030 feet. Alternately, the drainage ways at the northwest and southwest corners of the site are at elevations of about 980 to 940 feet, respectively.

SUBSURFACE CONDITIONS

Soil Conditions

Conditions encountered at each boring location are indicated on the individual boring logs. Stratification boundaries on the boring logs represent the approximate location of changes in soil types; in-situ, the transition between materials may be gradual. Based on the results of the soil borings, subsurface conditions on the project site can be generalized as follows.

All of the borings encountered either a plowed zone or grass vegetation and a root zone at the ground surface. Below the surface, Boring 12 encountered organic clay soil to a depth of about 7 feet below grade. The remaining borings generally encountered dark brown lean clay soils to depths of about 1½ to 3 feet below grade.

Below the layers described above, the borings generally encountered sandy lean clay with sand layers. These soils were typically medium to very stiff in consistency, except for a layer of soft lean clay in Boring 10. The sandy lean clays graded in color from light brown near the surface, to gray with increasing depth. Shale inclusions were noticed in the lower portion of the sandy lean clay in Boring 10, indicating that shale bedrock may be close below the bottom of this boring. All fifteen soil borings terminated in the sandy lean clay at depths of about 15 to 16 feet below existing grade.

Please refer to the attached boring logs for additional information on the subsurface conditions at each boring location.

Water Level Observations

The borings were monitored while drilling and shortly after completion for the presence and level of groundwater. Water levels observed in the borings are noted on the boring logs. During drilling, water was observed only in Borings 6, 10, 11 and 12 at depths of about 8 to 12 feet below existing grade. Shortly after completion of drilling, water was measured in Borings 6, 10, 11 and 12 at depths of about 7 to 14 feet.

It should be noted that the borings were drilled during a dry time of the year, and after an extended period of below-average precipitation. Longer term monitoring in cased holes or piezometers would be required for a more accurate evaluation of the groundwater conditions.

It should be recognized that fluctuations of the groundwater table might occur due to seasonal variations in the amount of rainfall, runoff and other factors not evident at the time the borings were performed. Therefore, groundwater levels during construction or at other times in the life of the development may be higher or lower than the levels indicated on the boring logs. The possibility of groundwater level fluctuations should be considered when developing the design and construction plans for the project.

It is also our experience that perched water conditions commonly develop in the sand seams and layers following periods of heavy or prolonged precipitation. The likelihood of perched water conditions developing should also be considered when developing the design and construction plans for the project.

Dallas County Soil Survey Information

The Dallas County Soil Survey indicates site soils, outside of the drainageways, to be predominantly Nicollet and Clarion series soils. These soils are typically loam and clay loam, formed on rises and low ridges in glacial till. Seasonal high water levels in these soils can rise to within 2½ feet of ground surface.

Alternately, in the drainageways, the Dallas County Soil Survey indicates site soils to be predominantly Storden and Coland series soils. These soils are typically loam and clay loam, formed in glacial till and loamy alluvium. Seasonal high water levels in the Storden soils are within 1 to 3 feet of grade.

Of note is that the Soil Survey map includes a symbol for a depression in the east-central portion of the site. Okoboji soils are commonly associated with these symbols. Okoboji soils consist of

very poorly drained soils, in closed depressions, on uplands. Borings 10 (soft lean clays) and 12 (organic clays) were located in the vicinity of this map symbol.

PRELIMINARY ENGINEERING DISCUSSION

Geotechnical Considerations

In summary, it is our opinion the parcel can be developed into suitable building sites. Special design and construction considerations should be addressed due to the lower strength and organic clay soils, likelihood of perched water conditions, and partly organic topsoils. Due to these conditions, construction monitoring and testing by Terracon personnel is recommended during the various phases of development.

Several drainageways extend through the project site, and an existing pond is located in the south-central portion of the site. Site stripping in these areas is expected to extend deeper than the estimated 8 to 12 inches in order to remove organic soils, or soft and mucky alluvium. Similarly, it may be necessary to place a layer of crushed stone in order to provide a stable base for construction equipment and compaction of new engineered fill.

Lower strength, medium to soft consistency soils with high moisture contents were encountered in Boring 10, and organic soils were encountered in Boring 12. These soils are highly susceptible to disturbance from construction activity, and would provide poor support conditions for overlying structures. In cut areas, exposure of these soils will make subgrade preparation difficult. Therefore, special design and construction considerations should be anticipated as recommended in the following sections.

Depending upon the final grading plan, groundwater seepage should be anticipated in cut areas. Also, deeper excavations for utility installation, foundations and basements should anticipate seepage. This will not only affect construction, but will affect the long-term performance of the basements, lower level floor slabs and pavements. Consideration should be given to developing the site such that the basement floor elevations can be established as high as practical, and/or designing the basement levels with a proper subsurface drainage system. A permanent drainage system, as described in the **Floor Slabs** section, is recommended around the basement walls, and possibly below basement slabs, to help maintain dry conditions.

Site Stripping and Subgrade Preparation

In preparing the site for construction, all deleterious materials such as vegetation, root zone, organic topsoil, or soft, frozen or otherwise unsuitable materials should be stripped from below

the proposed building and pavement areas, and areas to receive fill. The actual stripping depths will vary and should be evaluated by qualified geotechnical personnel during construction. In general, a stripping depth on the order of 8 to 12 inches should be anticipated in the agricultural fields.

Deeper stripping depths should be anticipated along drainage features, near Boring 12, and in the existing pond. It is our experience that a removal depth of 3 to 5 feet is not uncommon in small ponds such as this. The fill placed along the dam of this pond should also be removed, as it is likely poorly compacted. In addition, after stripping in these areas, it is likely that a layer of crushed stone will be needed in order to improve stability for equipment and overlying fill.

Prior to placement of fill, the subgrade exposed after stripping should be proofrolled in the presence of a geotechnical engineer. Equipment used for proofrolling should have a minimum gross weight of 25 tons. Proofrolling aids in providing a firm base for compaction of new fill and delineating soft or disturbed areas that may exist below subgrade level. Proofrolling is not recommended in soft soils. Unstable areas observed at this time should be improved by moisture conditioning and compaction, or by undercutting and replacing with suitable compacted fill. In addition, the stability of foundation and floor slab finished subgrades should be observed by a geotechnical engineer immediately prior to placing concrete.

Cut areas are expected to encounter water-bearing sand seams and layers in the native soils. These materials will be highly susceptible to disturbance from construction activity. The water-bearing sand seams will be unstable under construction equipment, particularly if precipitation occurs at the time of construction. Consideration could be given to installing shallow trench drains to intercept surface runoff and seepage during site grading. Subgrade conditions should be observed by Terracon personnel during construction.

Any tile lines encountered or damaged during grading operations should be repaired or connected to a new line to allow drainage to continue. The lines should not be plugged.

When the excavations progress to the point of being within one to two feet of subgrade level, heavy construction equipment can cause disturbance and strength loss in the native soils. These soils may dry and stiffen slightly under favorable weather conditions, thus helping prevent disturbance of the underlying softer materials. However, the use of low contact pressure, track equipment, or remote excavation equipment may be necessary to assist in fine grading. Installing shallow trench drains would provide a more effective means of groundwater control.

In unstable areas, it may be necessary to place a layer of crushed stone to stabilize the subgrade and help expedite construction. A geotextile material in combination with a layer of crushed stone could also be used to help increase subgrade stability. Consideration could also

be given to treating high moisture content, low-strength subgrade soils with Class C fly ash to help improve subgrade strength. Fly ash should be thoroughly mixed into the soil with a high-speed rotary mixer. The percentage of fly ash required should be reviewed by the geotechnical engineer during construction.

The clay soils at this site have high silt and sand content. As a result, slopes exposing or formed of this material are highly susceptible to surface erosion, sediment transport and sloughing, and will be difficult to maintain. We recommend slopes of 3H:1V, or flatter, for both cut and fill slopes. Surface runoff should be diverted away from the slopes to the extent possible, and erosion protection will be required. If a vegetative cover is planned, temporary erosion protection may be required until the vegetation can be established.

Seepage is anticipated in the deeper cut slopes. We do not anticipate any deep-seated slope failures if slopes are constructed at 3H:1V or flatter. However, the seepage could cause minor, long-term maintenance concerns with the slope, such as erosion and localized slumps or soft areas. These items are not expected to jeopardize the overall stability of the slope, but could disturb the surface of the slope and, if allowed to progress, could eventually affect the property behind the top of the cut slope. A subsurface drain could be installed in the slope if it is desired to intercept the seepage before it can exit the cut face. The need for such a drain may be more definitively determined based on observations after excavation of the slopes.

The underlying stiff to very stiff clays are generally expected to be more stable in cut areas and excavations. However, even these soils can experience pumping and instability if subjected to repeated heavy loads by construction equipment.

Fill Materials and Compaction

All fill materials should consist of approved materials, free of organic matter and debris. Fill used below floor slabs, foundations and pavements should consist of inorganic, low volume change fill. Low volume change fill would consist of granular material, or low plasticity cohesive soil with a liquid limit less than 45 and a plasticity index less than 23. If the granular fill is not drained by gravity, by sump and pump, or other suitable outlet, then it should contain at least 18% fines.

We recommend that the on site topsoil and organic clays be reserved for use outside of areas to support pavements and structures.

In general, the on-site lean clay soils would be suitable for reuse as low-volume change fill. Significant drying will be required if the soft, wet lean clay soils are used for engineered fill. Further testing is recommended during construction to evaluate the suitability of the on-site soils for use as structural fill.

All fill should be placed and compacted in horizontal lifts of 9 inches or less in loose thickness. Fill placed on slopes steeper than 5:1 (horizontal to vertical) should be benched into the slope. A maximum bench height on the order of 2 feet, separated by horizontal steps, is recommended.

All fill material placed for lightly loaded building support and greater than 1 foot below subgrade elevation in roadways for pavement support should be compacted to at least 95% of the soil's standard Proctor dry density (ASTM D 698). All fill material placed within the upper 1 foot of pavement subgrade elevation should be compacted to at least 98% of the soil's standard Proctor dry density. Fill placed below footing foundations should be evaluated on a site-specific basis, depending on building loads and footing bearing pressures, but is usually recommended to be compacted to 95% to 98% of the soil's standard Proctor dry density. The higher degree of fill compaction below footings should extend laterally beyond the exterior edges of the perimeter footings for at least 8 inches per foot of fill thickness below the footing base elevation.

Some adjustments in the moisture content of on-site soils will be required to achieve adequate compaction. The soil's water content at the time of compaction should be at -2 to +3% of the soils optimum moisture value for cohesive soils as determined by the standard Proctor test (ASTM D 698). In general, the moisture content of well-graded, granular materials should be within $\pm 3\%$ of the material's optimum moisture content. However, the gradation of a granular material may have an affect on its stability and the moisture content required for proper compaction. Therefore, we recommend the geotechnical engineer review the granular materials proposed for use as structural fill in order to determine their suitability, as well as establish a recommended moisture content range, if applicable.

By their function, agricultural terraces impede the flow of surface water. Therefore, it is not uncommon for natural soils behind agricultural terraces to become wetter and softer than the surrounding soil. Additional drying of these soils should be anticipated where they are excavated and used as structural fill in other areas of the site. If present at or below subgrade elevation, such soils should be undercut and replaced with stable, compacted fill.

Upon completion of filling operations, care should be taken to help prevent the subgrade disturbance and maintain the subgrade moisture content prior to construction of foundations, floor slabs and pavements. Weather conditions such as freezing, thawing, rain, or dry weather can also contribute to subgrade disturbance. Equipment traffic directly on bearing surfaces should be avoided when possible to help prevent disturbance of bearing soils, particularly on high moisture content or saturated soils. Therefore, care should be taken during the site grading operation to provide adequate site drainage and help prevent disturbance of the bearing soils. If the subgrade should become saturated, desiccated, or disturbed, the affected material should be removed or replaced, or these materials should be scarified, moisture

conditioned as necessary, and recompact prior to construction of footings or floor slabs. If time elapses between subgrade preparation and further construction, subgrades should be reworked and retested prior to placement of structures.

The geotechnical engineer should be retained to monitor subgrade conditions and fill placement during site grading, and to perform field density tests as each lift of fill is placed in order to evaluate compliance with the design requirements. Standard Proctor and Atterberg limits tests should be performed on representative samples of fill materials before their use on the site.

Embankment Settlements

Where more than about 5 feet of fill will be placed, the weight of the new fill is expected to cause some consolidation of underlying medium to soft-consistency native soils. The result of the consolidation would be settlement of the fill. In order to reduce post-construction settlements in fill areas, we recommend the construction schedule allow time for settlement from the weight of the new fill to occur before proceeding with construction of structures, pavements and slabs. The new fill should be placed to subgrade elevation as far in advance of foundation slab and utility construction as possible.

The magnitude of settlement and time required for settlements to occur under the weight of the fill are expected to vary depending upon the subsurface conditions and the amount of fill. Based on the soils encountered, it is expected that much of the settlement should occur within about 4 to 6 weeks for a maximum fill thickness of 10 feet. Settlement monuments consisting of either steel rods driven several feet into the fill or settlement plates should be placed, and settlement readings should be obtained at least twice per week beginning immediately after completion of fill placement. These readings should be provided to Terracon as they become available to evaluate the time rate and magnitude of consolidation. Once the readings indicate that settlements have slowed considerably, then placement of overlying structures, pavements and slabs could proceed. If larger fill thickness are planned, consideration should be given to performing consolidation tests to more accurately predict the time rate and amount of settlement.

Pavements

As a minimum, the upper 1 foot of subgrade soils should consist of inorganic, low volume change fill compacted to at least 98% of the material's standard Proctor dry density. All fill placed below this level should be compacted to at least 95%.

Organic soils were observed in Boring 12, and these materials are considered poor materials for support of overlying pavements, as they are subject to long-term movements due to decay and compressibility of the organic material. To develop a stable subgrade, we would

recommend that a minimum of 2 feet of crushed stone be provided below the pavement in this area. The crushed stone would be underlain by a geofabric, and subdrains are recommended along the pavement curbs. Alternately, several feet of approved fill material from on-site could be considered to develop a stable subgrade. The long-term decay and compressibility of the organic material can lead to sags after a period of several years, and shortened life cycle of the pavement. Complete removal and replacement of the organic material would be needed to eliminate this risk.

On most project sites, the site grading is accomplished relatively early in the construction phase. Fills are placed and compacted, and the initial surface is prepared in a relatively uniform manner. However, as construction proceeds, excavations are made into these areas, rainfall and surface water saturates some areas, heavy traffic from construction equipment disturbs the subgrade, and surface irregularities are often filled with loose materials to temporarily improve trafficability. As a result, the pavement subgrades, initially prepared early in the project, should be carefully evaluated as the time for pavement construction approaches.

Within a few days of planned paving, we recommend the pavement subgrades be proofrolled with a loaded tandem axle dump truck. Particular attention should be given to high traffic areas that were rutted and disturbed earlier, and to areas where backfilled trenches are located. Areas where unstable conditions exist should be repaired by scarification and recompaction or by removing and replacing the materials with properly compacted fill. In addition, depending on the contractor's use of paving equipment, measures may be required to improve subgrade strength for support of heavily loaded asphalt and concrete trucks in addition to the requirement of 98% compaction in the upper foot.

Water that is allowed to pond on or adjacent to the pavement can saturate and soften the subgrade soils and accelerate pavement deterioration. Cracks that develop in the pavements should be sealed promptly. Paved areas should be sloped to provide rapid drainage of surface water, and should drain water away from the pavement edges.

Depending on final site grades, a subsurface drainage system may be required to help lower groundwater levels and improve drainage below the pavements. Subsurface drainage systems generally prolong the life of a pavement and help to prevent saturation of the subgrade soils that can result in a reduction of subgrade strength. In fill areas, groundwater levels would not be anticipated within the proposed subgrade soils. In areas of cut, a minimum 4-inch thick, free-draining granular base in conjunction with subdrains should be considered beneath the pavement. Subdrains are also recommended below pavements utilizing a granular base course. The underdrain system will help prevent infiltrated surface water from ponding beneath pavements and softening the pavement subgrade. The use of a granular base and subdrains would be beneficial for controlling the subgrade moisture and minimizing frost action. The

granular base should consist of clean well-graded crushed stone meeting the requirements of Section 4121, 4123, or 4132 of the Iowa Department of Transportation Standard Specifications.

The subdrains should consist of perforated pipes with a minimum 4-inch diameter. The drain lines should be placed along the shoulders of roadways. The invert of the drain lines should extend to a depth of at least 4 feet below proposed grade and be sloped to provide positive gravity drainage to a reliable discharge point. The drain lines should be embedded in at least 4 inches of clean well-graded drainage material meeting the specifications for the Iowa Department of Transportation porous backfill, Section 4131 or an alternative free-draining granular material encapsulated with suitable filter fabric. The drainage backfill for the subdrain lines should extend up and be hydraulically connected to the free-draining, granular base in the pavement section. Subdrains should be installed in accordance with IDOT Specifications.

Underground Utility Construction

Trench Excavations

Trench excavations for underground utilities should be performed in accordance with OSHA Health and Safety Standards for Excavations, and in accordance with applicable local, state, and federal safety regulations. The contractor should be aware that slope height, slope inclination, or excavation depths should in no case exceed those specified by these safety regulations. Flatter slopes may be required depending upon conditions encountered.

The soils commonly contained sand seams and layers. Perched groundwater conditions are anticipated, and will affect soil conditions in the excavations. In cohesive soils, it may be possible to dewater with a series of sump pits and pumps. However, should trench excavations extend a significant depth into water-bearing sand, a more extensive dewatering system will be needed to control groundwater seepage. Groundwater levels should be maintained at least 2 feet below excavation depths throughout utility construction and during initial backfilling of excavations. Control of groundwater will help to improve subgrade stability and reduce the risk of side-slope caving.

The materials, which will be encountered along the excavation of the proposed utility alignments, will vary. Thus, the stability of the excavation slopes should be reviewed continuously by qualified personnel.

All vehicles and soil piles should be kept back from the crest of excavation slopes to maintain safe working conditions. Vehicles and soil piles located adjacent to trenches would reduce the stability of the slopes as outlined by the OSHA regulations, and a more detailed stability analysis may be required for these conditions. For excavations greater than 20 feet in depth,

the side slopes and/or shoring systems should be designed by a registered professional engineer.

The exposed slope faces should be protected against the elements. Surface water should be diverted from all excavations. Trench excavation, utility placement, and backfilling should be completed as rapidly as possible. The length of open trench should be held to a minimum. When groundwater is present, soils encountered along the proposed alignments could be susceptible to slope failure, even with relatively flat slopes, and this should be considered during construction.

Pipe Bedding

Care should be taken so that the bedding soils at the base of the excavations are not disturbed during construction. Disturbed or unstable materials should be removed before placing any granular bedding material. If groundwater or unstable conditions are encountered, a greater thickness of bedding material may be required. The thickness of the required bedding material will vary across the project site and should be evaluated at the time of construction. The bedding material and thickness should satisfy the requirements of the pipe manufacturer.

Trench Backfill

All backfill materials should consist of approved materials, free of debris and organic materials. Based on the limited soil borings, the majority of on-site soils encountered would be suitable for reuse as trench backfill. However, moisture conditioning of these materials should be anticipated to achieve proper compaction in the trenches. The soil's water content at the time of compaction should be as indicated in the **Fill Materials and Compaction** section of this report. Low-plasticity cohesive soil or granular soil should be used for fill in structural or paved areas.

To help prevent future settlement of the backfill material, it is recommended that trench backfill be placed in lifts no greater than 9 inches in loose thickness; however, use of smaller or hand-held compaction equipment may require thinner lifts. In non-structural or unpaved areas that are not sensitive to settlement, backfill should be compacted to a minimum of 90% of the soil's standard Proctor dry density (ASTM D 698). Any backfill supporting roadways or other lightly loaded structures should be compacted as recommended previously.

Preliminary Building Design Recommendations

Shallow Footing Foundations

Based on the results of the subsurface exploration, it is our opinion that lightly loaded residential and commercial buildings can generally be supported on spread footings provided that the site preparation and foundation site soils are prepared in accordance with the recommendations in this report. Suitable native soils encountered in the borings consisted of medium to stiff-consistency lean clay soils. Allowable bearing pressures should be evaluated by Terracon for specific building locations when final building locations, elevations, and structural loads are known. Further evaluations are recommended and would include field exploration and laboratory testing.

The organic soils encountered in Boring 12 are considered unsuitable for support of building footings and slabs. We recommend that the organic soils be removed from below building areas, and replaced with well compacted, engineered fill.

Depending on groundwater levels during construction, footing or basement excavations may extend near to or below the groundwater level. Dewatering of such excavations will be essential to help prevent disturbance of the bearing soils and expedite construction. Dewatering in relatively cohesive soils could probably be accomplished with sump pits and pumps. The groundwater level should be maintained at least 2 foot below the bottom of the excavation during construction.

The base of all footing excavations should be free of water and loose soils prior to placement of concrete. Should the soils at the bearing level become disturbed, the affected soil should be stabilized or removed prior to placement of concrete. Where high moisture conditions are encountered, it may be necessary to place a mud-mat or a 4- to 6-inch thick layer of crushed stone in the bottom of the excavation to provide a working base for footing construction. Concrete should be placed as soon as possible after excavating to help prevent disturbance of bearing soils.

Basement Floor Slabs

A perimeter drain system is recommended along all below-grade walls. Such a system would include a drain tile installed adjacent to the wall footing, overlain by granular backfill that extends to within about 2 feet of exterior grade. The granular fill should be capped with cohesive fill in order to help keep surface water out of the system. The drain tile should drain to a sump and pump, or other suitable gravity outlet.

Where shallow groundwater is anticipated, a subfloor drainage system consisting of a permeable base and subdrains are recommended. A permeable granular base such as clean, well-graded crushed stone containing less than 3% passing the U.S. No. 200 sieve would be placed directly below basement floor slabs. A filter fabric may be desirable below the permeable base to prevent infiltration of underlying clay soils. Care will be necessary to avoid contaminating this layer with subgrade material prior to floor slab placement.

Subdrains should be placed along the inside edge of exterior wall footings, and subdrains should be spaced a maximum of 20 feet apart below the basement floor. The subdrains should consist of a perforated pipe installed in shallow trenches at least 1 foot below subgrade level. The subdrains should be surrounded with graded granular material (IDOT 4131). Inflows into this drainage system may be significant depending upon the actual soil conditions and presence of sand seams and layers, and multiple sump pits and pumps may be needed in isolated areas. Subsurface drainage systems should be evaluated on a case by case basis. Basement walls and floor slabs should also be waterproofed.

Floor Slabs On-Grade

We recommend the subgrade be prepared in accordance with the recommendations presented previously. Upper level floor slabs areas should be thoroughly proofrolled and test probed by Terracon personnel. Any low density or soft material encountered should be overexcavated and replaced with suitable compacted fill. As a minimum, the upper 1 foot of subgrade soils below the floor slab and granular base should consist of an inorganic, low plasticity material compacted to at least 95% of the material's standard Proctor dry density (ASTM D 698). During earthwork procedures, care should be taken to maintain the subgrade moisture content prior to construction of the floor slab. If the subgrade should become desiccated, the affected material should be removed or these materials should be scarified, moistened, and recompacted prior to floor slab placement.

In non-basement areas, we recommend a minimum 6-inch thick crushed stone base be placed below the floor slab. The crushed stone should contain less than 6% passing the U.S. No. 200 sieve. The crushed stone will serve as a leveling course, capillary moisture break, and help distribute light loads. Care will be necessary to avoid contaminating this layer with soil prior to floor slab placement.

General

Adequate surface drainage should be provided in order to help prevent wetting of the foundation soils. Excessive moisture can reduce the soils bearing capacity and contribute to foundation settlement. For protection of the footing bearing soils, we recommend that the

surrounding grades be sloped away from the structures on all sides. If it is desirable to have shrubbery adjacent to the building, installation of isolated planters should be considered. Splash blocks or gutter extensions should be used to remove roof water from away from the foundation walls.

ADDITIONAL SUBSURFACE EXPLORATION

The subsurface exploration program for this project included fifteen borings widely spaced across the 290-acre development. Also, specific information concerning design conditions for specific structures were not available. Additional field exploration, laboratory testing, and engineering evaluations are recommended for specific structures (such as commercial buildings, residences or culverts) when more detailed information is available.

GENERAL COMMENTS

Terracon should be retained to review the final design plans and specifications so comments can be made regarding interpretation and implementation of our geotechnical recommendations in the design and specifications. This will help reduce the potential for misinterpretation of the recommendations provided in this report. Terracon should also be retained to provide testing and observation during excavation, grading, foundation and construction phases of the project. Testing and observation by the geotechnical engineer of record provides documentation regarding compliance with the recommendations provided in the geotechnical engineering report and the project specifications. Terracon shall not be held responsible for others' interpretation of subsurface conditions. Therefore, we recommend that the owner retain Terracon for foundation and earthwork phases of the project.

The analysis and preliminary recommendations presented in this report are based upon the limited data obtained from the borings performed at the indicated locations and from other information discussed in this report. This report does not reflect variations that may occur between the widely spaced borings, across the site, or due to the modifying effects of weather. The nature and extent of such variations may not become evident until during or after construction. If variations appear, we should be immediately notified so that further evaluation and supplemental recommendations can be provided. Terracon should be retained for additional explanation and consulting during future design phases of this project. Additional subsurface exploration and laboratory testing may be required depending on final design and site grading plans.

The scope of services for this project does not include either specifically or by implication any environmental or biological (e.g., mold, fungi, bacteria) assessment of the site or identification

Proposed Subdivision – Broderick Farms Property
Wauke, Iowa
Terracon Project No. 08045011-01
February 19, 2004

Terracon

or prevention of pollutants, hazardous materials or conditions. If the owner is concerned about the potential for such contamination or pollution, other studies should be undertaken.

This report has been prepared for the exclusive use of our client for specific application to the project discussed and has been prepared in accordance with generally accepted geotechnical engineering practices. No warranties, either express or implied, are intended or made. Site safety, excavation support, and dewatering requirements are the responsibility of others. In the event that changes in the nature, design, or location of the project as outlined in this report are planned, the conclusions and recommendations contained in this report shall not be considered valid unless Terracon reviews the changes and either verifies or modifies the conclusions of this report in writing.

We appreciate the opportunity to be of service to you on this phase of your project and look forward to assisting you during the future design and construction phases. If you have any questions concerning this report, or if we may be of further service to you, please contact us.

Sincerely,
TERRACON




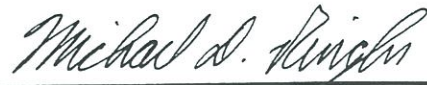
Michael D. Ringler, P.E.
Senior Project Engineer

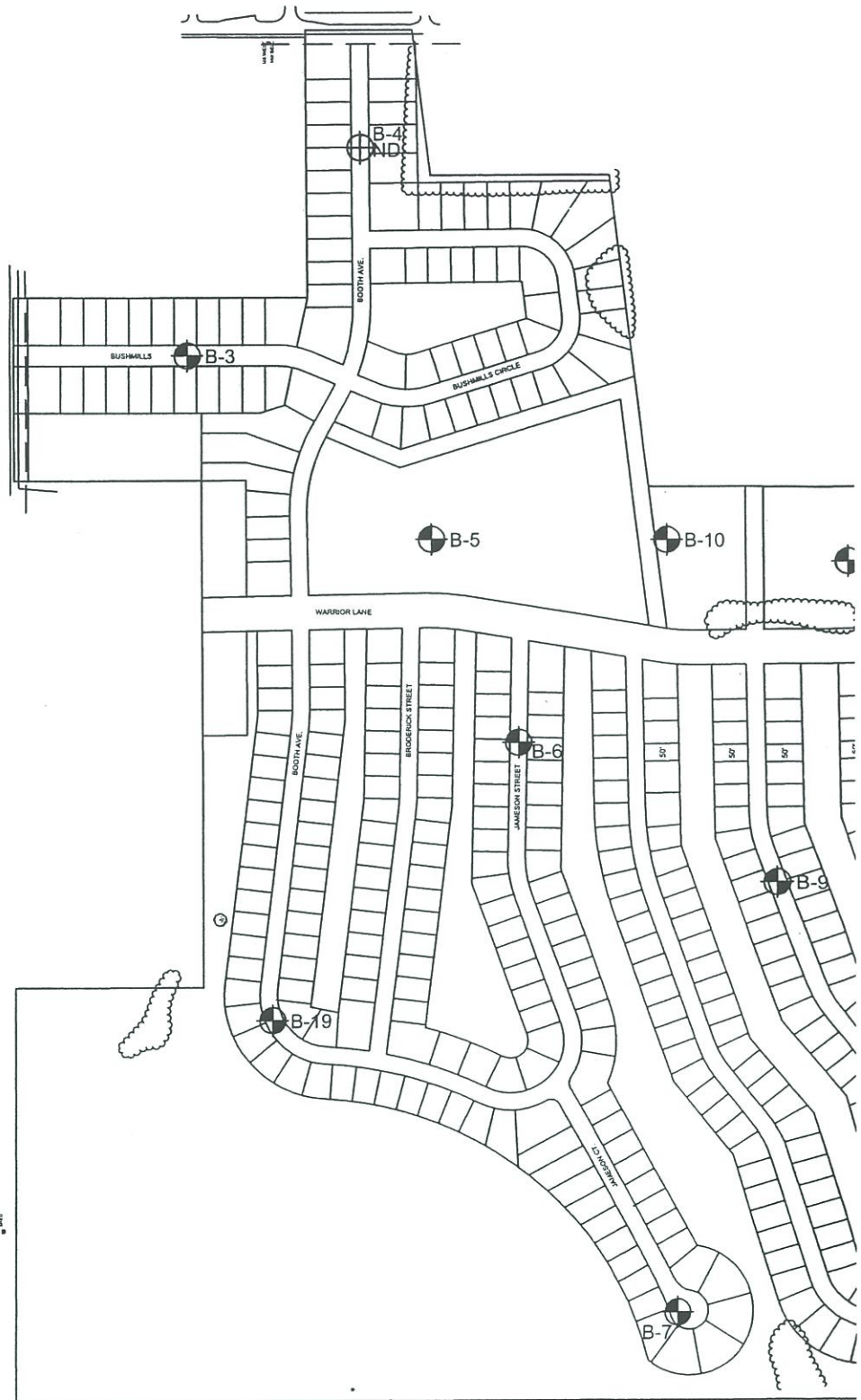


Jeffrey L. Magner, P.E.
Senior Project Engineer

MDR\JLM\lthh08045011\45011-01.doc

Distribution: Addressee (2)

	<p>I hereby certify that this engineering document was prepared by me or under my direct personal supervision and that I am a duly licensed Professional Engineer under the laws of the State of Iowa.</p> <p> Feb. 19, 2004</p> <p>Michael D. Ringler, P.E. Date</p> <p>My license renewal date is December 31, 2004.</p>
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LEGEND

B-3  - Approximate Boring Location

B-4  - Boring Not Drilled to be Drilled and Reported under Seperate Cover

NOTE: DRAWING IS INTENDED FOR GENERAL LOCATION PURPOSES ONLY.

Page 1 of 1

BORE1 5011.GPJ TERRACON.GDT 2/18/04

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	84	FOREMAN	JG
APPROVED	MDR	JOB #	08045011

LOG OF BORING NO. 5

Page 1 of 1

CLIENT		Hubbell Realty Property								
SITE		University Avenue and V Avenue Waukee, Iowa								
		PROJECT								
		Broderick Farms Property								
GRAPHIC LOG	DESCRIPTION	DEPTH, ft.	USCS SYMBOL	SAMPLES			TESTS			
				NUMBER	TYPE	RECOVERY, in.	SPT - N ** BLOWS / ft.	WATER CONTENT, %	DRY UNIT WT pcf	UNCONFINED STRENGTH, psf
	Approx. Surface Elev.: 1032 ft									
	2	1030			HS					
			CL	1	SS	2	9	21		3000*
					HS					
		5	SC	2	SS	8	8	17		2000*
					HS					
		10	CL	3	SS	18	8	22		2500*
					HS					
		15	CL	4	SS	18	8	12		4000*
	14	1018								
	15.5	1016.5								
	<u>SANDY LEAN CLAY</u> , Trace Gravel Gray, Stiff, Occasional Sand Seams and Cobbles <u>BOTTOM OF BORING</u>									

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

WATER LEVEL OBSERVATIONS, ft			
WL	▽ NONE	WD	▽ NONE AB
WL	▽		▽
WL			

Terracon

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	84	FOREMAN	JG
APPROVED	MDR	JOB #	08045011

Page 1 of 1

Hubbell Realty Property

PROJECT

Broderick Farms Property

BQRE1 5011.GPJ TERRACON.GDT 2/18/04




*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

Terracon

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	84	FOREMAN	JG
APPROVED	MDR	JOB #	08045011

LOG OF BORING NO. 7

Page 1 of 1

CLIENT		Hubbell Realty Property									
SITE		University Avenue and V Avenue Waukee, Iowa		PROJECT Broderick Farms Property							
GRAPHIC LOG	DESCRIPTION	DEPTH, ft.	USCS SYMBOL	SAMPLES				TESTS			
				NUMBER	TYPE	RECOVERY, in.	SPT - N ** BLOWS / ft.	WATER CONTENT, %	DRY UNIT WT pcf	UNCONFINED STRENGTH, psf	
	Approx. Surface Elev.: 990 ft										
	Root Zone at Surface, Plowed Field <u>LEAN CLAY</u> , Trace Sand	988			HS						
	Dark Brown		CL	1	SS	4	6	18		2500*	
	<u>SANDY LEAN CLAY</u> with sand layers				HS						
	Light Brown				HS						
	Stiff to Medium										
	Occasional Cobbles		SC	2	SS	6	5	14			
		983.5			HS						
	<u>SILTY FINE SAND</u>				HS						
	Light Brown										
	Medium Dense										
		979.5	SM	3	SS	12	12	16			
	<u>SANDY LEAN CLAY</u> , trace gravel				HS						
	Light Brown										
	Stiff										
	Occasional Sand Seams and Cobbles										
		974.5	CL	4	SS	18	12	16		2500*	
	<u>BOTTOM OF BORING</u>										

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

WATER LEVEL OBSERVATIONS, ft



WL	▽ NONE	WD	▽ NONE	AB
WL	▽		▽	
WL				

Terracon

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	84	FOREMAN	JG
APPROVED	MDR	JOB #	08045011

LOG OF BORING NO. 8

Page 1 of 1

CLIENT		Hubbell Realty Property									
SITE		University Avenue and V Avenue Waukee, Iowa		PROJECT							
		Broderick Farms Property									
GRAPHIC LOG	DESCRIPTION	DEPTH, ft.	USCS SYMBOL	SAMPLES				TESTS			
				NUMBER	TYPE	RECOVERY, in.	SPT - N ** BLOWS / ft.	WATER CONTENT, %	DRY UNIT WT pcf	UNCONFINED STRENGTH, psf	Atterberg Limits
	Approx. Surface Elev.: 990 ft										
	1.5 Root Zone, Plowed Field LEAN CLAY , Trace Sand	988.5			PA						LL=40 PL=17 PI=23
	Dark Brown SANDY LEAN CLAY , Trace Gravel		CL	1	ST	7		19	105	3500*	
	Gray Brown, Stiff	986			PA						
	SANDY LEAN CLAY with sand layers				PA						
	Light Brown Stiff Occasional Cobbles	981	5	CL	2	ST	21		19	113	
	SANDY LEAN CLAY , trace gravel				PA						
	Gray Stiff Occasional Sand Seams and Cobbles		10	CL	3	ST	20		21	108	4000*
					PA						

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

WATER LEVEL OBSERVATIONS, ft			
WL	▽ NONE	WD	▽ NONE AB
WL	▽	WD	▽
WL		WD	

Terracon

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	101	FOREMAN	JL
APPROVED	MDR	JOB #	08045011

LOG OF BORING NO. 9

Page 1 of 1

CLIENT

Hubbell Realty Property

SITE

University Avenue and V Avenue
Waukee, Iowa

PROJECT

Broderick Farms Property

GRAPHIC LOG	DESCRIPTION	DEPTH, ft.	USCS SYMBOL	SAMPLES			TESTS		
				NUMBER	TYPE	RECOVERY, in.	SPT - N ** BLOWS / ft.	WATER CONTENT, %	DRY UNIT WT pcf
	Approx. Surface Elev.: 1017 ft				PA				
	Root Zone, Plowed Field <u>LEAN CLAY</u> , Trace Sand Dark Brown, Medium	1014	CL	1	SS	6	6	26	2000*
	<u>LEAN CLAY</u> with sand Brown	1012	CL		PA				
	<u>SANDY LEAN CLAY</u> with sand layers Light Brown Stiff Occasional Cobbles		CL	2	SS	16	10	20	2500*
					PA				
	Becoming Gray Brown below about 9 feet		CL	3	SS	16	11	21	3000*
					PA				
			CL	4	SS	16	10	22	3500*
	<u>BOTTOM OF BORING</u>	1001.5							

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

WATER LEVEL OBSERVATIONS, ft

WL	▽ NONE	WD	▽ NONE	AB
WL	▽		▽	
WL				

Terracon

BORING STARTED	2-6-04
BORING COMPLETED	2-6-04
RIG 101	FOREMAN JL
APPROVED MDR	JOB # 08045011

LOG OF BORING NO. 10

Page 1 of 1

CLIENT		Hubbell Realty Property									
SITE		University Avenue and V Avenue Waukee, Iowa									
		PROJECT									
		Broderick Farms Property									
GRAPHIC LOG	DESCRIPTION	DEPTH, ft.	USCS SYMBOL	SAMPLES				TESTS			Atterberg Limits
				NUMBER	TYPE	RECOVERY, in.	SPT - N ** BLOWS / ft.	WATER CONTENT, %	DRY UNIT WT pcf	UNCONFINED STRENGTH, psf	
	Approx. Surface Elev.: 1020 ft										
	Root Zone, Grass <u>LEAN CLAY</u> , Trace Sand Dark Brown 1017.5			PA							LL=35 PL=23 PI=12
	<u>LEAN CLAY</u> , trace sand Gray Brown Very Stiff 1015	5	CL 1	ST	12		24		4500*		
	<u>LEAN CLAY</u> , trace sand Light Gray Brown Soft 1011			PA							
	<u>LEAN CLAY</u> , trace sand Light Gray Brown Soft 1011		CL 2	ST	6		30		1000*		
	<u>SANDY LEAN CLAY</u> with sand layers Light Brown, Stiff Occasional Cobbles 1008	10		PA							
	<u>SANDY LEAN CLAY</u> with sand layers Light Brown, Stiff Occasional Cobbles 1008		CL 3	ST	24		24	104	3500*		
	<u>SANDY LEAN CLAY</u> , trace gravel and shale inclusions Gray, Stiff Occasional Sand Seams and Cobbles 1004	15		PA							
	<u>SANDY LEAN CLAY</u> , trace gravel and shale inclusions Gray, Stiff Occasional Sand Seams and Cobbles 1004		CL 4	ST	18		19	113	4000*		
	<u>BOTTOM OF BORING</u>										

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

WATER LEVEL OBSERVATIONS, ft			
WL	▽ 12	WD	▽ 14 AB
WL	▽		▽
WL			

Terracon

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	84	FOREMAN	JG
APPROVED	MDR	JOB #	08045011

Page 1 of 1

CLIENT

Hubbell Realty Property

SITE

University Avenue and V Avenue
Waukee, Iowa

PROJECT

Broderick Farms Property

BORE1 5011.GPJ TERRACON.GDT 2/18/04

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer




WATER LEVEL OBSERVATIONS, ft			
WL	∇ 9	WD	∇ 7.5 AB
WL	∇		∇
WL			

Terracon

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	84	FOREMAN	JG
APPROVED	MDR	JOB #	08045011

LOG OF BORING NO. 12

Page 1 of 1

CLIENT		Hubbell Realty Property									
SITE		University Avenue and V Avenue Waukee, Iowa									
		PROJECT									
		Broderick Farms Property									
GRAPHIC LOG	DESCRIPTION	DEPTH, ft.	USCS SYMBOL	SAMPLES				TESTS			
				NUMBER	TYPE	RECOVERY, in.	SPT - N ** BLOWS / ft.	WATER CONTENT, %	DRY UNIT WT pcf	UNCONFINED STRENGTH, psf	
	Approx. Surface Elev.: 988 ft										
	Root Zone, Grass LEAN CLAY With Organics Dark Brown Stiff to Medium				PA						
				CL/OL 1	ST	12		24	99	2500*	
		5			PA						
				CL/OL 2	ST	12		39	79	1000*	
					PA						
	SANDY LEAN CLAY with sand layers, trace organics Dark Brown										
				CL	3	ST	12	28	90		
		10			PA						
	SANDY LEAN CLAY , trace gravel Gray Stiff Occasional Sand Seams and Cobbles										
				CL	4	ST	13	20	111	3000*	
		15									
	BOTTOM OF BORING										

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

WATER LEVEL OBSERVATIONS, ft


WL	9	WD	8.5	AB
WL		WD		
WL		WD		

Terracon

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	101	FOREMAN	JL
APPROVED	MDR	JOB #	08045011

LOG OF BORING NO. 14

Page 1 of 1

CLIENT		PROJECT										
SITE		Broderick Farms Property										
Hubbell Realty Property												
University Avenue and V Avenue												
Waukee, Iowa												
GRAPHIC LOG	DESCRIPTION	DEPTH, ft.	USCS SYMBOL	SAMPLES				TESTS				
				NUMBER	TYPE	RECOVERY, in.	SPT - N ** BLOWS / ft.	WATER CONTENT, %	DRY UNIT WT pcf	UNCONFINED STRENGTH, psf		
	Approx. Surface Elev.: 974 ft				PA							
	2				PA							
					CL	1	ST	7		22		4500*
					CL	2	ST	18		19	103	3000*

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

WATER LEVEL OBSERVATIONS, ft			
WL	▽ NONE	WD	▽ NONE AB
WL	▽		▽
WL			

Terracon

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	101	FOREMAN	JL
APPROVED	MDR	JOB #	08045011

LOG OF BORING NO. 15

Page 1 of 1

CLIENT		PROJECT									
SITE		Broderick Farms Property									
Hubbell Realty Property		University Avenue and V Avenue									
Waukee, Iowa											
GRAPHIC LOG	DESCRIPTION	DEPTH, ft.	USCS SYMBOL	SAMPLES				TESTS			
				NUMBER	TYPE	RECOVERY, in.	SPT - N ** BLOWS / ft.	WATER CONTENT, %	DRY UNIT WT pcf	UNCONFINED STRENGTH, psf	
	Approx. Surface Elev.: 962 ft										
	Root Zone, Grass				PA						
	<u>LEAN CLAY</u> , Trace Sand										
	Dark Brown	959.5	SC	1	SS	6	5	18			
	<u>SANDY LEAN CLAY</u> with sand layers				PA						
	Light Brown										
	Medium to Stiff										
	Occasional Cobbles		CL	2	SS	8	10	18		4000*	
					PA						
	Becoming Gray Brown below about 9 feet										

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

WATER LEVEL OBSERVATIONS, ft



WL	▽ NONE	WD	▽ NONE	AB
WL	▽		▽	
WL				

Terracon

BORING STARTED	2-6-04
BORING COMPLETED	2-6-04
RIG	101
FOREMAN	JL
APPROVED MDR	JOB # 08045011

LOG OF BORING NO. 16

Page 1 of 1

CLIENT		PROJECT								
SITE		Broderick Farms Property								
Hubbell Realty Property										
University Avenue and V Avenue										
Waukee, Iowa										
GRAPHIC LOG	DESCRIPTION	DEPTH, ft.	USCS SYMBOL	SAMPLES				TESTS		
				NUMBER	TYPE	RECOVERY, in.	SPT - N ** BLOWS / ft.	WATER CONTENT, %	DRY UNIT WT pcf	UNCONFINED STRENGTH, psf
	Approx. Surface Elev.: 977 ft				PA					
	2.5 Root Zone at Surface, Grass <u>LEAN CLAY</u> , trace sand Dark Brown 974.5		CL	1	ST	7		17	112	5000*
	<u>SANDY LEAN CLAY</u> with sand layers Light Brown Stiff Occasional Cobbles	5	SM	2	ST	16		24	88	2000*
					PA					
		10	CL	3	ST	14		20	111	3500*
					PA					
	13 <u>SANDY LEAN CLAY</u> , trace gravel Gray Stiff 964		CL	4	ST	17		19	111	3500*
	16 Occasional Sand Seams and Cobbles <u>BOTTOM OF BORING</u> 961	15								

3DT 2/18/04

*Hand Penetrometer

*Hand Penetrometer

**140 Lbs Automatic SPT Hammer

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

WATER LEVEL OBSERVATIONS, ft

WL	▽ NONE	WD	▽ NONE	AB
WL	▽		▽	
WL				

Terracon

BORING STARTED	2-6-04
BORING COMPLETED	2-6-04
RIG	101
FOREMAN	JL
APPROVED MDR	JOB # 08045011

BORE1 5011.GPJ TERRACON.GDT 2/18/04

LOG OF BORING NO. 17

Page 1 of 1

CLIENT		PROJECT									
SITE		Broderick Farms Property									
Hubbell Realty Property											
University Avenue and V Avenue											
Waukee, Iowa											
GRAPHIC LOG	DESCRIPTION	DEPTH, ft.	USCS SYMBOL	SAMPLES				TESTS			
				NUMBER	TYPE	RECOVERY, in.	SPT - N ** BLOWS / ft.	WATER CONTENT, %	DRY UNIT WT pcf	UNCONFINED STRENGTH, psf	
	Approx. Surface Elev.: 986 ft				PA						
	2.5 Root Zone at Surface, Plowed Field <u>LEAN CLAY</u> , Trace Sand Dark Brown 983.5		CL	1	SS	6	6	15			
	<u>SANDY LEAN CLAY</u> with sand layers Light Brown Medium to Stiff	5			PA						
			CL	2	SS	12	5	24			2000*
					PA						
	9.5 976.5	10	CL	3	SS	18	6	23			2500*
	<u>SANDY LEAN CLAY</u> , trace gravel Gray Stiff Occasional Sand Seams and Cobbles				PA						
	15.5 970.5	15	CL	4	SS	18	12	18			3000*
	<u>BOTTOM OF BORING</u>										

DDT 2/18/04

*Hand Penetrometer

The stratification lines represent the approximate boundary lines between soil and rock types: in-situ, the transition may be gradual.

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

WATER LEVEL OBSERVATIONS, ft

WL	▽ NONE	WD	▽ NONE	AB
WL	▽		▽	
WL				

Terracon

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	84	FOREMAN	JG
APPROVED	MDR	JOB #	08045011

BORE1 5011.GPJ TERRACON.GDT 2/18/04

Page 1 of 1

ROBE1 5011 GPI TERRACON.GDT 2/18/04

*Hand Penetrometer
**140 Lbs Automatic SPT Hammer

BORING STARTED		2-6-04	
BORING COMPLETED		2-6-04	
RIG	84	FOREMAN	JG
APPROVED	MDR	JOB #	08045011

LOG OF BORING NO. 19

Page 1 of 1

CLIENT

Hubbell Realty Property

SITE

University Avenue and V Avenue
Waukee, Iowa

PROJECT

Broderick Farms Property

GRAPHIC LOG

DESCRIPTION

DEPTH, ft.

USCS SYMBOL

NUMBER

TYPE

RECOVERY, in.

SPT - N **
BLOWS / ft.

WATER
CONTENT, %

DRY UNIT WT
pcf

UNCONFINED
STRENGTH, psf

Approx. Surface Elev.: 952 ft

Root Zone at Surface, Plowed Field
LEAN CLAY, Trace Sand
Dark Brown

949.5

2.5

LEAN CLAY, trace sand
Gray Brown
Stiff

948

4

SANDY LEAN CLAY with sand layers
Light Brown
Stiff
Occasional Cobbles

5

CL

2

SS

12

8

20

3000*

10

CL

3

SS

18

8

19

3000*

15

CL

4

SS

18

11

21

2500*

Becoming Gray Brown below about 14 feet

936.5

15.5

BOTTOM OF BORING

*Hand Penetrometer

**140 Lbs Automatic SPT Hammer

The stratification lines represent the approximate boundary lines
between soil and rock types: in-situ, the transition may be gradual.

WATER LEVEL OBSERVATIONS, ft

WL ☒ NONE WD ☒ NONE AB

WL ☒ ☒

WL ☒

Terracon

BORING STARTED 2-6-04

BORING COMPLETED 2-6-04

RIG 84 FOREMAN JG

APPROVED MDR JOB # 08045011

BORE1 5011.GPJ TERRACON.GDT 2/19/04

GENERAL NOTES

DRILLING & SAMPLING SYMBOLS:

SS : Split Spoon - 1 1/2" I.D., 2" O.D., unless otherwise noted
 ST : Thin-Walled Tube - 2" O.D., Unless otherwise noted
 PA : Power Auger
 HA : Hand Auger
 DB : Diamond Bit - 4", N, B
 AS : Auger Sample
 HS : Hollow Stem Auger

PS : Piston Sample
 WS : Wash Sample
 FT : Fish Tail Bit
 RB : Rock Bit
 BS : Bulk Sample
 PM : Pressuremeter
 DC : Dutch Cone
 WB : Wash Bore

Standard "N" Penetration: Blows per foot of a 140 pound hammer falling 30 inches on a 2 inch OD split spoon, except where noted.

WATER LEVEL MEASUREMENT SYMBOLS:

WL : Water Level
 WCI : Wet Cave In
 DCI : Dry Cave In
 AB : After Boring

WS : While Sampling
 WD : While Drilling
 BCR : Before Casing Removal
 ACR : After Casing Removal

Water levels indicated on the boring logs are the levels measured in the borings at the times indicated. In pervious soils, the indicated levels may reflect the location of groundwater. In low permeability soils, the accurate determination of ground water levels is not possible with only short term observations.

DESCRIPTIVE SOIL CLASSIFICATION:

Soil Classification is based on the Unified Soil Classification System and ASTM Designations D-2487 and D-2488. Coarse Grained Soils have more than 50% of their dry weight retained on a #200 sieve; they are described as: boulders, cobbles, gravel or sand. Fine Grained Soils have less than 50% of their dry weight retained on a #200 sieve; they are described as: clays, if they are plastic, and silts if they are slightly plastic or non-plastic. Major constituents may be added as modifiers and minor constituents may be added according to the relative proportions based on grain size. In addition to gradation, coarse grained soils are defined on the basis of their relative in-place density and fine grained soils on the basis of their consistency. Example: Lean clay with sand, trace gravel, stiff (CL); silty sand, trace gravel, medium dense (SM).

CONSISTENCY OF FINE-GRAINED SOILS:

Unconfined Compressive Strength, Qu, psf	Consistency
< 500	Very Soft
500 - 1,000	Soft
1,001 - 2,000	Medium
2,001 - 4,000	Stiff
4,001 - 8,000	Very Stiff
8,001 - 16,000	Hard
> 16,000	Very Hard

RELATIVE DENSITY OF COARSE-GRAINED SOILS:

N-Blows/ft.	Relative Density
0-3	Very Loose
4-9	Loose
10-29	Medium Dense
30-49	Dense
50-80	Very Dense
80 +	Extremely Dense

RELATIVE PROPORTIONS OF SAND AND GRAVEL

Descriptive Term(s) (of Components Also Present in Sample)	Percent of Dry Weight
Trace	< 15
With	15 - 29
Modifier	> 30

RELATIVE PROPORTIONS OF FINES

Descriptive Term(s) (of Components Also Present in Sample)	Percent of Dry Weight
Trace	< 5
With	5 - 12
Modifier	> 12

GRAIN SIZE TERMINOLOGY

Major Component Of Sample	Size Range
Boulders	Over 12 in. (300mm)
Cobbles	12 in. to 3 in. (300mm to 75mm)
Gravel	3 in. to #4 sieve (75mm to 4.75mm)
Sand	#4 to #200 sieve (4.75mm to 0.075mm)
Silt or Clay	Passing #200 sieve (0.075mm)

UNIFIED SOIL CLASSIFICATION SYSTEM

Criteria for Assigning Group Symbols and Group Names Using Laboratory Tests ^A				Soil Classification				
				Group Symbol	Group Name ^B			
Coarse-Grained Soils More than 50% retained on No. 200 sieve	Gravels More than 50% of coarse fraction retained on No. 4 sieve	Clean Gravels Less than 5% fines ^C	$Cu \geq 4$ and $1 \leq Cc \leq 3^E$	GW	Well-graded gravel ^F			
			$Cu < 4$ and/or $1 > Cc > 3^E$	GP	Poorly graded gravel ^F			
		Gravels with Fines More than 12% fines ^C	Fines classify as ML or MH	GM	Silty gravel ^{F, G, H}			
			Fines classify as CL or CH	GC	Clayey gravel ^{F, G, H}			
	Sands 50% or more of coarse fraction passes No. 4 sieve	Clean Sands Less than 5% fines ^E	$Cu \geq 6$ and $1 \leq Cc \leq 3^E$	SW	Well-graded sand ^I			
			$Cu < 6$ and/or $1 > Cc > 3^E$	SP	Poorly graded sand ^I			
		Sands with Fines More than 12% fines ^D	Fines classify as ML or MH	SM	Silty sand ^{G, H, I}			
			Fines classify as CL or CH	SC	Clayey sand ^{G, H, I}			
			Fine-Grained Soils 50% or more passes the No. 200 sieve	Silts and Clays Liquid limit less than 50	inorganic	$PI > 7$ and plots on or above "A" line ^J	CL	Lean clay ^{K, L, M}
						$PI < 4$ or plots below "A" line ^J	ML	Silt ^{K, L, M}
organic	$\frac{\text{Liquid limit — oven dried}}{\text{Liquid limit — not dried}} < 0.75$	OL			Organic clay ^{K, L, M, N} Organic silt ^{K, L, M, O}			
Silts and Clays Liquid limit 50 or more	inorganic	PI plots on or above "A" line		CH	Fat clay ^{K, L, M}			
		PI plots below "A" line		MH	Elastic silt ^{K, L, M}			
	organic	$\frac{\text{Liquid limit — oven dried}}{\text{Liquid limit — not dried}} < 0.75$	OH	Organic clay ^{K, L, M, P} Organic silt ^{K, L, M, Q}				
Highly organic soils				PT	Peat			

^ABased on the material passing the 3-in. (75-mm) sieve.

^BIf field sample contained cobbles or boulders, or both, add "with cobbles or boulders, or both" to group name.

^CGravels with 5 to 12% fines require dual symbols:
GW-GM well-graded gravel with silt
GW-GC well-graded gravel with clay
GP-GM poorly graded gravel with silt
GP-GC poorly graded gravel with clay

^DSands with 5 to 12% fines require dual symbols:
SW-SM well-graded sand with silt
SW-SC well-graded sand with clay
SP-SM poorly graded sand with silt
SP-SC poorly graded sand with clay

$$^{E}Cu = D_{60}/D_{10} \quad Cc = \frac{(D_{30})^2}{D_{10} \times D_{60}}$$

^FIf soil contains $\geq 15\%$ sand, add "with sand" to group name.

^GIf fines classify as CL-ML, use dual symbol GC-GM, or SC-SM.

^HIf fines are organic, add "with organic fines" to group name.

^IIf soil contains $\geq 15\%$ gravel, add "with gravel" to group name.

^JIf Atterberg limits plot in shaded area, soil is a CL-ML, silty clay.

^KIf soil contains 15 to 29% plus No. 200, add "with sand" or "with gravel", whichever is predominant.

^LIf soil contains $\geq 30\%$ plus No. 200 predominantly sand, add "sandy" to group name.

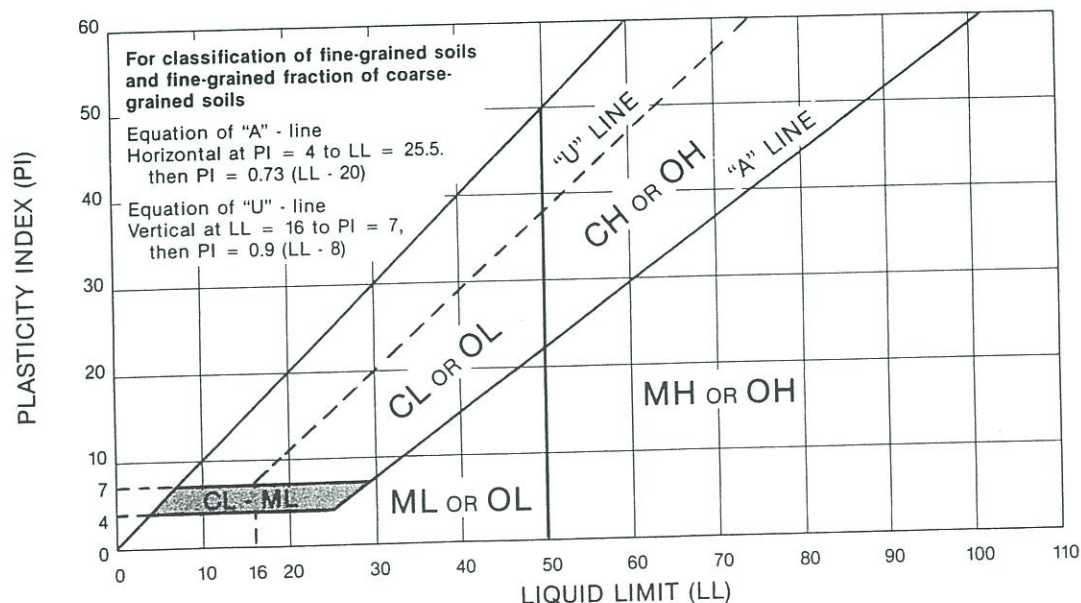
^MIf soil contains $\geq 30\%$ plus No. 200, predominantly gravel, add "gravelly" to group name.

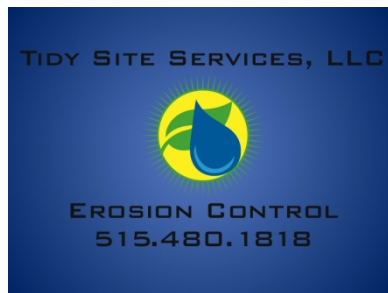
^N $PI \geq 4$ and plots on or above "A" line.

^O $PI < 4$ or plots below "A" line.

^P PI plots on or above "A" line.

^Q PI plots below "A" line.





Tidy Site Services, LLC
175 South 9th St.
West Des Moines, IA 50265
(515) 639-7347
tidysiteservices@yahoo.com

INVOICE

BILL TO

Hubbell Development
6900 Westown Pkwy.
West Des Moines, IA 50266

INVOICE # 12084

DATE 09/27/2016

DUE DATE 09/27/2016

TERMS Due on receipt

ADDRESS

Glynn Village

SERVICE DATE	ACTIVITY	QTY	RATE	AMOUNT
09/17/2016	Misc Install gravel where Westown Pkwy. washed out	1	150.00	150.00

Please remit payment immediately.

175 South 9th St. WDM, IA 50265

REID 515-480-1818 OFFICE 515-639-7347

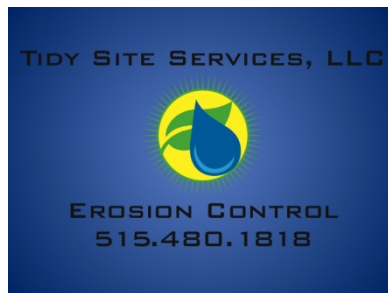
E-MAIL tidysiteservices@yahoo.com

Thank you for your business - We appreciate it very much.

TIDY SITE SERVICES, LLC

BALANCE DUE

\$150.00



Tidy Site Services, LLC
175 South 9th St.
West Des Moines, IA 50265
(515) 639-7347
tidysiteservices@yahoo.com

INVOICE

BILL TO

Hubbell Development
6900 Westown Pkwy.
West Des Moines, IA 50266

INVOICE # 11946

DATE 09/14/2016

DUE DATE 09/14/2016

TERMS Due on receipt

ADDRESS

Glynn Village

SERVICE DATE	ACTIVITY	QTY	RATE	AMOUNT
09/06/2016	Silt Sock Install Install green silt sock - Westown Pkwy. ditch checks on southern most ditch	144	2.00	288.00

Please remit payment immediately.

175 South 9th St. WDM, IA 50265

REID 515-480-1818 OFFICE 515-639-7347

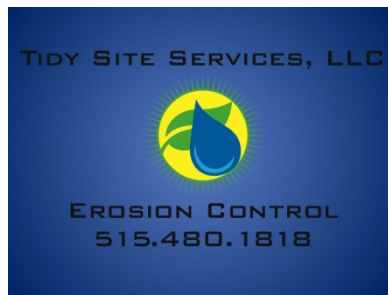
E-MAIL tidysiteservices@yahoo.com

Thank you for your business - We appreciate it very much.

TIDY SITE SERVICES, LLC

BALANCE DUE

\$288.00



Tidy Site Services, LLC
175 South 9th St.
West Des Moines, IA 50265
(515) 639-7347
tidysiteservices@yahoo.com

INVOICE

BILL TO

Hubbell Development
6900 Westown Pkwy.
West Des Moines, IA 50266

INVOICE # 11932

DATE 08/31/2016

DUE DATE 08/31/2016

TERMS Due on receipt

ADDRESS

Glynn Village

SERVICE DATE	ACTIVITY	QTY	RATE	AMOUNT
08/16/2016	Silt Fence Install Install silt fence - ditch checks in SE, S. Center, SW ditches on Westown Pkwy.	738	1.45	1,070.10

Please remit payment immediately.

175 South 9th St. WDM, IA 50265

REID 515-480-1818 OFFICE 515-639-7347

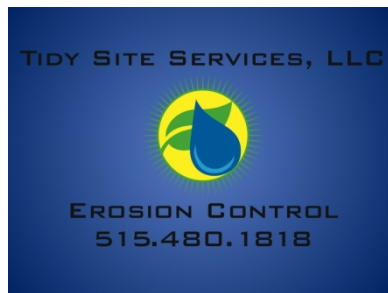
E-MAIL tidysiteservices@yahoo.com

Thank you for your business - We appreciate it very much.

TIDY SITE SERVICES, LLC

BALANCE DUE

\$1,070.10



Tidy Site Services, LLC
175 South 9th St.
West Des Moines, IA 50265
(515) 639-7347
tidysiteservices@yahoo.com

INVOICE

BILL TO

Hubbell Development
6900 Westown Pkwy.
West Des Moines, IA 50266

INVOICE # 11931

DATE 09/12/2016

DUE DATE 09/12/2016

TERMS Due on receipt

ADDRESS

Glynn Village

SERVICE DATE	ACTIVITY	QTY	RATE	AMOUNT
09/09/2016	Silt Fence Install Install silt fence on Warrior Lane and Westown Pkwy. NE corner	119	1.45	172.55
09/09/2016	Silt Sock Install Install silt sock - Install green 12" sock checks in south Westown ditch	81	2.00	162.00
09/09/2016	Silt Fence Install Install silt fence - east side of Pioneer Gun Club and along north side by creek	247	1.45	358.15

Please remit payment immediately.

175 South 9th St. WDM, IA 50265

REID 515-480-1818 OFFICE 515-639-7347

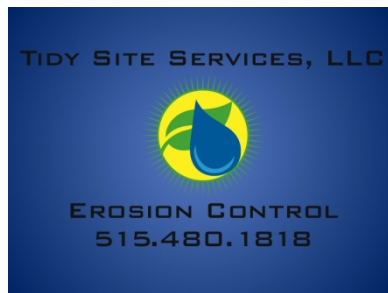
E-MAIL tidysiteservices@yahoo.com

Thank you for your business - We appreciate it very much.

TIDY SITE SERVICES, LLC

BALANCE DUE

\$692.70



Tidy Site Services, LLC
175 South 9th St.
West Des Moines, IA 50265
(515) 639-7347
tidysiteservices@yahoo.com

INVOICE

BILL TO

Hubbell Development
6900 Westown Pkwy.
West Des Moines, IA 50266

INVOICE # 11807

DATE 08/31/2016

DUE DATE 08/31/2016

TERMS Due on receipt

ADDRESS

Glynn Village-Westown Pkwy.

SERVICE DATE	ACTIVITY	QTY	RATE	AMOUNT
08/30/2016	Grade Work Grading & hydroseed - black dirt stock pile on NW side of Westown Pkwy.	2	105.00	210.00
08/30/2016	Hydro-seed Hydro-seed	3	1,000.00	3,000.00

Please remit payment immediately.

175 South 9th St. WDM, IA 50265

REID 515-480-1818 OFFICE 515-639-7347

E-MAIL tidysiteservices@yahoo.com

Thank you for your business - We appreciate it very much.

TIDY SITE SERVICES, LLC

BALANCE DUE

\$3,210.00

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

12.31.2015

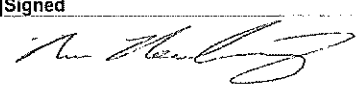
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
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		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	
Weather at time of this inspection?		21 degrees partly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Ground frozen, snow covered. 6 1/2 inches of snow since 12/28					
Observation Report Certification Statement			Signed		
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.			Date		
			 12.31.2015 Development Inspector: 515-608-3296		

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

12.24.2015


Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 12/23 3am		Storm Duration (hrs):	13 Approximate Rainfall (in): 0.84
Weather at time of this inspection?		32 degrees cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Need to replace several silt fences	when weather allows	
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Mcaninch planning on starting up again after new years. Currently have about 2/3 of sanitary sewer done.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					12.24.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

12.18.2015

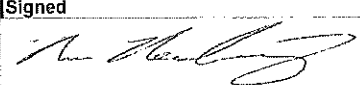
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 12/12 6pm		Storm Duration (hrs):	72 Approximate Rainfall (in): 3.78
Weather at time of this inspection?		34 degrees scattered clouds			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Heavy rain this past weekend. Sugar Creek was out of its banks. Has receded somewhat. SW corner of plat 10 still stable. Maninch to get standpipe installed in plat 10 basin next week.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					12.18.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

12.11.2015

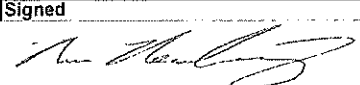
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	
Weather at time of this inspection?		48 degrees overcast			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no				
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Remarks					
Site was fairly dry-Tidy Site still finishing up some stabilization towards north and east of plat 10.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					12.11.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

12.04.2015


Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 11/30 12am		Storm Duration (hrs): 19	Approximate Rainfall (in): 0.37
Weather at time of this inspection?		46 degrees clear			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	mcaninch to clear large sediment deposits on westown		before end of today
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Noticeable track-out from site onto westown from loading/unloading heavy equipment. Mcaninch to clean end of day.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					12.04.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

11.27.2015

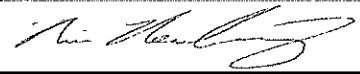
Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	Approximate Rainfall (in):
Weather at time of this inspection?		28 degrees overcast			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
got 6 1/2 inches of snow last week. Ground still partially covered.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					11.27.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village

NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

11.20.2015



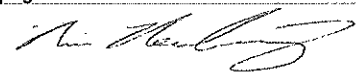
Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 11/18 12am		Storm Duration (hrs):	14
Weather at time of this inspection?		39 degrees light snow			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Snow falling while on site. Ground partially covered. Mcaninch still on site working.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					11.20.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

11.13.2015

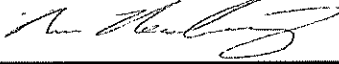
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
41	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	full
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 11/11 2pm	Storm Duration (hrs):	10	Approximate Rainfall (in): 0.5
Weather at time of this inspection?		50 degrees clear			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Mcaninch repaired partially eroded area on westown from drainage coming off warrior ln.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					11.13.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

11.06.2015

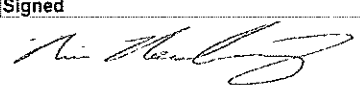
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 11/5 4pm		Storm Duration (hrs):	2
				Approximate Rainfall (in):	0.06
Weather at time of this inspection?		57 degrees mostly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no				
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Remarks					
Mcaninch starting sanitary on SW portion of plat 10. they have 2 pipe crews on site.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					11.06.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Wauke

County: Dallas

Date of Observation:

10.30.2015

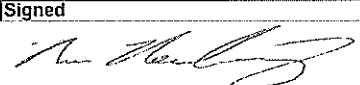
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		mobilizing/Sanitary Sewer/stabilization			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 10/27 12pm		Storm Duration (hrs):	14 Approximate Rainfall (in): 0.59
Weather at time of this inspection?		55 degrees overcast			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
mcaninch has mobilized pipe crews and started working on sanitary. Tidy Site has stabilized west side of plat 10. Seed starting to come in well.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					10.30.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

10.23.2015

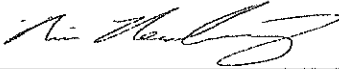
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Pipe sanitary, water, storm			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 10/21 9am	Storm Duration (hrs):	3	Approximate Rainfall (in): 0.03
Weather at time of this inspection?		58 degrees light rain			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch has two crews working on sanitary. Tidy site swept around construction entrance to the north-track out.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				10.23.2015	
			Development Inspector:	515-608-3296	

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

10.16.2015

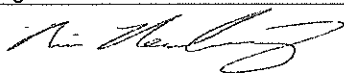
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Stabilization; mobilization of pipe crew			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	
Weather at time of this inspection?		Approximate Rainfall (in):			
		53 degrees clear			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Pipe crew started this week on sanitary.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					10.16.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

10.9.2015

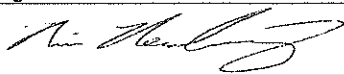
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Stabilization; mobilization of pipe crew			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	Approximate Rainfall (in):
Weather at time of this inspection?		54 degrees cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch mobilizing equipment to start pipe next week.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					10.9.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

10.2.2015

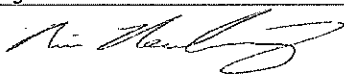
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
14	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
15	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
16	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
17	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
18	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
19	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
20	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
21	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
22	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
23	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
24	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
25	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
26	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
27	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
28	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
29	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
30	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Stabilization			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 9/29 1am		Storm Duration (hrs): 7	Approximate Rainfall (in): 0.81
Weather at time of this inspection?		54 degrees clear			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Site starting to dry out. Pipe to potentially start next week.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					10.2.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

9.25.2015

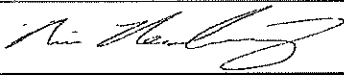
Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
14	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
32	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
33	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
34	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
35	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
36	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
36	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
37	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
38	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
39	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
40	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal

Control No.	Description of Control	Condition of Control		Action Required	Notes
41	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	full
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Stabilization			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 9/22 7pm	Storm Duration (hrs):	3	Approximate Rainfall (in): 0.5
Weather at time of this inspection?		69 degrees overcast			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Pipe still hasn't started. Some seed starting to come in on east side.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				9.25.2015	
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

9.18.2015

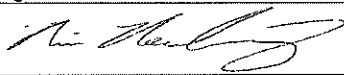
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading/Stabilization			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 9/17 6am		Storm Duration (hrs):	4 Approximate Rainfall (in): 0.41
Weather at time of this inspection?		69 degrees overcast			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	seed/mulch respread areas		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Tidy site has finished temp seeding all backyards and outlots. Still waiting on construction plan approval from the city.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					9.18.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

9.11.2015

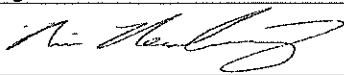
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
14	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
15	Silt Fence		Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
16	Silt Fence		Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
17	Silt Fence		Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
18	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
19	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
20	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
21	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
22	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
23	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
24	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
25	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
26	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
27	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
28	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
29	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	
30	Silt Fence		Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
			Poor	<input type="checkbox"/> Replacement	
			Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input checked="" type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
41	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	full
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading/Stabilization			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 9/6 10pm		Storm Duration (hrs): 6 Approximate Rainfall (in): 1.44	
Weather at time of this inspection?		55 degrees sunny			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	ordered seed/mulch in respread areas	9/6/2015	
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Tidy site started temp seeding backyard/respread areas. Still have some to do next week on south and east side of site.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					9.11.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

9.04.2015

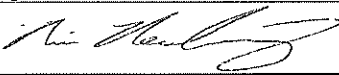
Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
14	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
15	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
16	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
17	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
18	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
19	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
20	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
21	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
22	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
23	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
24	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
25	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
26	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
27	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
28	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
29	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
30	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading/Stabilization			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 9/2 1AM		Storm Duration (hrs): 5	Approximate Rainfall (in): 0.5
Weather at time of this inspection?		88 degrees partly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	ordered seed/mulch in respread areas	9/6/2015	
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Tidy Site finished putting more fence in late last week/weekend. Called for update about seed/mulch. Tidy Site said they would be out seeding today/this weekend.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					9.04.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

8.28.2015

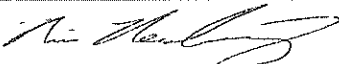
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
14	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading/Stabilization			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 8/28 3AM		Storm Duration (hrs): 13	Approximate Rainfall (in): 0.3
Weather at time of this inspection?		78 degrees overcast			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	ordered seed/mulch in respread areas	9/6/2015	
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch finishing grading today. Touching up around silt basin and slope to west of basin. Showed Tidy Site all new areas that we need silt fence before end of the weekend. Also ordered seed/mulch in respread areas that we discussed with Mcaninch and the city.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					8.28.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

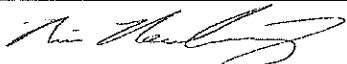
8.21.2015

Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:	Storm Start Date & Time: 8/19 4PM	Storm Duration (hrs):	3	Approximate Rainfall (in):	0.05
Weather at time of this inspection?		82 degrees scattered clouds			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch has about a week of grading left. Tidy site met on site with mcaninch to look at silt fence around pond/basin. Stockpile off warrior was getting smoothed up and made accessible for builders.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				8.21.2015	
			Development Inspector:	515-608-3296	

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

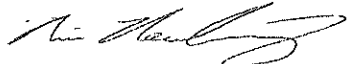
8.14.2015

Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
18	Silt Fence	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
19	Silt Fence	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
22	Silt Fence	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
27	Silt Fence	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
28	Silt Fence	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
29	Silt Fence	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
30	Silt Fence	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 8/14 12AM	Storm Duration (hrs):	3	Approximate Rainfall (in): 0.02
Weather at time of this inspection?		87 degrees partly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	scraping heavy areas of sediment on westown	end of work day	
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch has about a week of grading left. Tidy site met on site with mcaninch to look at silt fence around pond/basin. Stockpile off warrior was getting smoothed up and made accessible for builders.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				8.14.2015	
			Development Inspector:	515-608-3296	

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

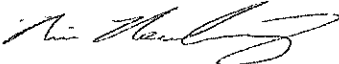
Date of Observation:

8.7.2015

Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
10	Silt Fence	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input checked="" type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 8/4 10pm		Storm Duration (hrs):	2
Weather at time of this inspection?		86 degrees partly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch has a couple weeks left of grading to do. Having tidy site come out next week to look at silt fencing around the basin several lines of fence to break up the drainage velocity.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				8.7.2015	
			Development Inspector:	515-608-3296	

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee


County: Dallas

Date of Observation:

7.31.2015

Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 7/28 8am	Storm Duration (hrs):	16	Approximate Rainfall (in): 2.44
Weather at time of this inspection?		87 degrees partly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch didn't work for a couple days after heavy rain event this week. They are on site today trying to disc dry the site. Having tidy site out next week to install silt fence around basin.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					7.31.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

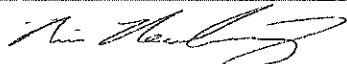
County: Dallas

Date of Observation:

7.24.2015

Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 7/20 10am		Storm Duration (hrs): 1	Approximate Rainfall (in): 0.02
Weather at time of this inspection?		77 degrees scattered clouds			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch working in basin still cutting to grade.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					7.24.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

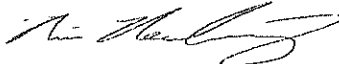
County: Dallas

Date of Observation:

7.17.2015

Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 7/16 1am		Storm Duration (hrs): 8	Approximate Rainfall (in): 0.93
Weather at time of this inspection?		93 degrees partly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
had track-out onto warrior ln coming from plat 10. Tidy site services scraped up around warrior ln.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					7.17.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

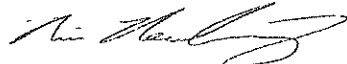
County: Dallas

Date of Observation:

7.10.2015

Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 7/6 5am	Storm Duration (hrs):	4	Approximate Rainfall (in): 0.24
Weather at time of this inspection?		93 degrees partly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch working on bailey west area, smaller basin area.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					7.10.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

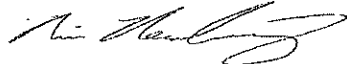
County: Dallas

Date of Observation:

7.3.2015

Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 6/28 4am		Storm Duration (hrs): 4	Approximate Rainfall (in): 0.8
Weather at time of this inspection?		75 degrees partly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					7.3.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Wauke

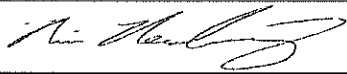
County: Dallas

Date of Observation:

6.26.2015

Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 6/25 12am		Storm Duration (hrs):	9
Weather at time of this inspection?		75 degrees overcast			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Heavy rain event yesterday morning. On Wednesday night, Mcaninch said they'd built some earth dams in swales to hold back some water in addition to the silt fence on site.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					6.26.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

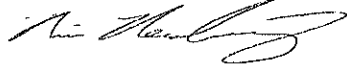
County: Dallas

Date of Observation:

6.19.2015

Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 6/15 1am	Storm Duration (hrs):	15	Approximate Rainfall (in): 1.57
Weather at time of this inspection?		81 degrees partly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch didn't work morning of 6/16-letting site dry after heavy rain 6/15.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					6.19.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

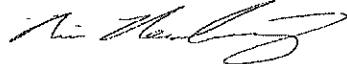
County: Dallas

Date of Observation:

6.12.2015

Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Grading			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 6/12 12am		Storm Duration (hrs): 10	Approximate Rainfall (in): 0.02
Weather at time of this inspection?		65 degrees overcast			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No	
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> yes <input type="checkbox"/>	<input type="checkbox"/>			
Remarks					
Mcaninch still stripping topsoil-see map. Very light rain, mcaninch still able to work. All initial perimeter controls were installed this week.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					6.12.2015
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235 Expires 5/31/2017

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

3.11.2016

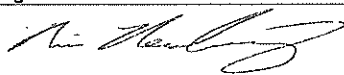
Observed By: Nicholas Newbury ICCSPPi

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
41	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	full
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer, water main, storm sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	
Weather at time of this inspection?		Approximate Rainfall (in):			
		66 degrees partly cloudy			
Do you suspect discharges may have occurred since Maintained		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Mcaninch working on pipe. 3 crews going this week. Ordered new silt fence from Tidy Site this morning.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					3.11.2016
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235 Expires 5/31/2017

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

3.4.2016

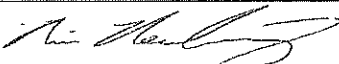
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
14	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
41	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	full
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	
Weather at time of this inspection?		Approximate Rainfall (in):			
		40 degrees overcast			
Do you suspect discharges may have occurred since Maintained		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Mcaninch mobilizing equipment to start pipe***					
Observation Report Certification Statement			Signed		
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.			 Development Inspector:		
			Date 3.4.2016		
			515-608-3296		

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village

NPDES Permit No.: IA-9433-9235 Expires 5/31/2017

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

2.26.2016



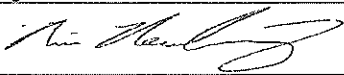
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
14	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
15	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
16	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
17	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
18	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
19	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
20	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
21	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
22	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
23	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
24	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
25	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
26	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
27	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
28	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
29	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal
30	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
41	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	full
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time:	Storm Duration (hrs):	Approximate Rainfall (in):	
Weather at time of this inspection?		44 degrees sunny			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Waiting for Mcaninch to begin working on pipe.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				2.26.2016	
			Development Inspector:	515-608-3296	

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235 Expires 5/31/2017

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

2.19.2016

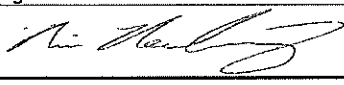
Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
41	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	full
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 2/16 12am		Storm Duration (hrs):	7
Weather at time of this inspection?		Approximate Rainfall (in): 0.35			
		50 degrees sunny*			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Almost all snow has melted.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					2.19.2016
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235 Expires 5/31/2017

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

2.12.2016

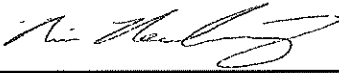
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
14	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	Approximate Rainfall (in):
Weather at time of this inspection?		18 degrees sunny, windy			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
3 inches of snow yesterday. Ground frozen, snow covered.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					2.12.2016
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235 Expires 5/31/2017

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

2.5.2016

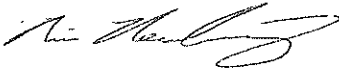
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input checked="" type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	
Weather at time of this inspection?		Approximate Rainfall (in):			
		28 degrees overcast			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
3 inches of snow this week. Ground frozen, snow covered.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					2.5.2016
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235 Expires 5/31/2017

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

1.29.2016

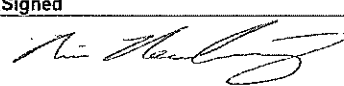
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
14	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
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		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
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		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
41	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	full
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	Approximate Rainfall (in):
Weather at time of this inspection?		39 degrees cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/ responsible person	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
most of snow has melted. Heavy snow in forecast in next few days.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					1.29.2016
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235 Expires 5/31/2017

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

1.22.2016

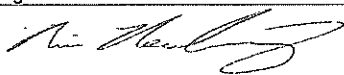
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	722
15	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Failure	<input type="checkbox"/> None <input type="checkbox"/> Repair/Cleanout <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	Approximate Rainfall (in):
Weather at time of this inspection?		24 degrees light snow			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
2 inches of snow this week. Ground frozen, snow covered.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					1.22.2016
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235 Expires 5/31/2017

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

1.15.2016

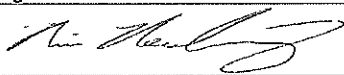
Observed By: Nicholas Newbury ICCSPPI

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control		Action Required	Notes
14	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
41	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	full
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time:		Storm Duration (hrs):	
Weather at time of this inspection?		23 degrees light snow			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Ground frozen.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					1.15.2016
			Development Inspector:		515-608-3296

NPDES SITE OBSERVATION REPORT

Project Name: Glynn Village



NPDES Permit No.: IA-9433-9235

Location: Plat 10

City: Waukee

County: Dallas

Date of Observation:

1.07.2015

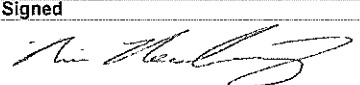
Observed By: Nicholas Newbury ICCSPP

Control No.	Description of Control	Condition of Control	Action Required	Notes
1	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
2	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
3	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
4	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
5	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
6	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
7	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
8	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
9	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
10	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
11	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
12	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
13	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

Control No.	Description of Control	Condition of Control	Action Required	Notes
14	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
15	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
16	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
17	Silt Fence	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
18	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
19	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
20	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
21	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
22	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
23	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
24	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
25	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input checked="" type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
26	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
27	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
28	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
29	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	
30	Silt Fence	<input type="checkbox"/> Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/> Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/> Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/> Failure	<input type="checkbox"/> Removal	

31	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
32	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
33	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
34	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
35	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
36	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
37	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
38	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
39	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	
40	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>	None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/>	Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/>	Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/>	Removal	

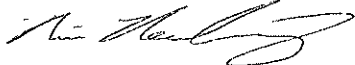
Control No.	Description of Control	Condition of Control		Action Required	Notes
41	Silt Fence	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
42	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input checked="" type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
43	Silt Fence	<input type="checkbox"/>	Good	<input type="checkbox"/> None	full
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	
		<input type="checkbox"/>	Good	<input type="checkbox"/> None	
		<input type="checkbox"/>	Fair	<input type="checkbox"/> Repair/Cleanout	
		<input type="checkbox"/>	Poor	<input type="checkbox"/> Replacement	
		<input type="checkbox"/>	Failure	<input type="checkbox"/> Removal	

Describe present phase of construction		Sanitary Sewer			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 1/6 1pm		Storm Duration (hrs): 24 Approximate Rainfall (in): 0.33	
Weather at time of this inspection?		35 degrees light drizzle			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/ responsible person
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Are wash out facilities available and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no	<input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>			
Remarks					
Ground still frozen, partially snow covered.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					1.07.2015
					Development Inspector: 515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 8-19-2016

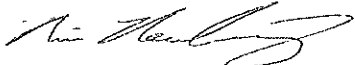
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukee, IA Dallas County

Describe present phase of construction		Backfill/respread		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 8/17 3am	Storm Duration (hrs): 1	approximate rainfall(inches): 0.04
Weather at time of this inspection?		87 degrees mostly cloudy		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	end of day as necessary
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		
Remarks				
McAninch backfilling eastern side of site(waddell area). Inlet protection was cleaned out on Monday of this week.				
Observation Report Certification Statement			Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 8-19-2016
			Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 8-12-2016

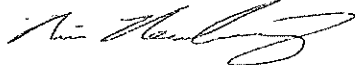
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Wauke, IA Dallas County

Describe present phase of construction		Backfill/respread		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 8/11 5am	Storm Duration (hrs): 29	approximate rainfall(inches): 1.79
Weather at time of this inspection?		80 degrees overcast		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	end of day as necessary
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		
Remarks				
McAninch not working today due to heavy rain yesterday and this morning. Inlet protection bags are full of water-will likely need cleaned out in the next few days. Basins were full during inspection-working properly. Starting to rut a little in the swale draining toward bailey west basin-will get reggraded before respread is complete.				
Observation Report Certification Statement			Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 8-12-2016
			Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 8-5-2016

Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Wauke, IA Dallas County

Describe present phase of construction		Finishing handwork			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 8/4 8pm		Storm Duration (hrs):	1 approximate rainfall(inches) 0.05
Weather at time of this inspection?		82 degrees cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Seed/mulch	after respread is complete	
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	sweep end of warrior ln	end of day	
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>			
Remarks					
Mcaninch began backfill on pembrook/waddell area. Track-out at the south end of warrior lane where plat 10 ties into plat 8/9. Mcaninch to sweep at end of the day-skidloader on site. Interns installed remaining inlet protection devices on all street intakes on waddell.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 8-5-2016	
			Development Inspector:	515-608-3296	



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 7-29-2016

Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukee, IA Dallas County

Describe present phase of construction		Finishing handwork, respread, backfill		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time:	Storm Duration (hrs):	approximate rainfall(inches)
Weather at time of this inspection?		70 degrees overcast		
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	sweep end of warrior In	end of day
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		
Remarks				
Alliance finishing up some handwork-ramps, mailbox pads etc. Interns cleaned out inlet protection on western side of site. Meaninch working on backfill.				
Observation Report Certification Statement			Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 7-29-2016
			Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 7-22-2016

Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukee, IA Dallas County

Describe present phase of construction: Finishing handwork, respread, backfill

Type of Inspection: ☒ Regular ☐ Pre-storm event ☐ During storm event ☐ Post-storm event

Weather Information

Has it rained since the last inspection? ☒ Yes ☐ No

If yes, provide: Storm Start Date & Time: 7/19 8am Storm Duration (hrs): 9 approximate rainfall(inches): 5.5

Weather at time of this inspection? 88 degrees scattered clouds

Do you suspect discharges may have occurred since the last inspection? ☒ Yes ☐ No

Are there any discharges at the time of inspection? ☒ Yes ☐ No

Overall Site Issues

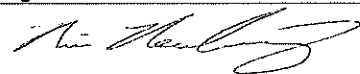
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seed/mulch	after respread is complete
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	sweep end of warrior in	end of day
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

Heavy rain event earlier this week. Basins were working-had not overtopped basins when I was on site. Tidy site to install more fence south of bailey west basin-need more fence before it reaches vegetative buffer along creek.

Observation Report Certification Statement

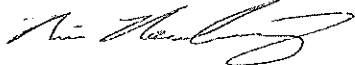
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.

Signed:  Date: 7-22-2016
Development Inspector: 515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 7-15-2016

Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukeet, IA Dallas County

Describe present phase of construction		Finishing handwork, trails, respread			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 7/13 12pm	Storm Duration (hrs):	2 approximate rainfall(inches)	0.53
Weather at time of this inspection?		75 degrees mostly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seed/mulch	after respread is complete	
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	sweep end of warrior In	end of day	
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>			
Remarks					
Tidy site has begun some spot seeding where mcaninch and alliance aren't working-west side of site. Mcaninch still working on grading in swales, outlots etc.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 7-15-2016	
			Development Inspector:	515-608-3296	



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 7-8-2016

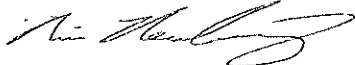
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 10 Waukee, IA Dallas County

Describe present phase of construction		respread of topsoil and paving of trails		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 7/7 3am	Storm Duration (hrs): 5	approximate rainfall(inches) 1.06
Weather at time of this inspection?		84 degrees partly cloudy		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	after respread gets finished
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

all lots have been backfilled and respread. Tidy Site to start seeding next week weather dependent. Mcaninch still has granular treches and cleanouts to install in swales so native seeding will wait until they have finished. All street intakes are now protected with fry-flo 18"X36" bags. Mcaninch will keep them cleaned out until plat is finished.

Observation Report Certification Statement		Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.			Date: 7-8-2016
		Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 7-1-2016

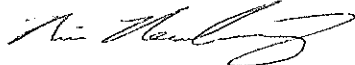
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 10 Wauke, IA Dallas County

Describe present phase of construction		Finishing pouring intakes/respread of topsoil		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 6/30 5pm	Storm Duration (hrs): 2	approximate rainfall(inches): 0.27
Weather at time of this inspection?		67 degrees scattered clouds		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Street sweep	after respread gets finished
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

Bought 40 fry flo bags from quick supply to be installed on street intakes. Alliance is finished with about 1/2 of intakes. Bags are on site to be installed as Alliance finishes up intakes. Mcaninch working on getting all lots respread and backfilled-about 2/3 done.

Observation Report Certification Statement		Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.			Date: 7-1-2016
		Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 6-24-2016

Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 10 Waukeet, IA Dallas County

Describe present phase of construction		Backfill and handwork		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event

Weather Information	
Has it rained since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

If yes, provide:	Storm Start Date & Time: 6/21 7pm	Storm Duration (hrs):	1	approximate rainfall(inches)	0.1
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Weather at time of this inspection?	84 degrees partly cloudy
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Do you suspect discharges may have occurred since the last inspection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there any discharges at the time of inspection?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Overall Site Issues

BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

Speck was out to sweep warrior in Tuesday afternoon. Mcaninch was backfilling west side of site.

Observation Report Certification Statement	Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.		Date: 6-24-2016
	Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 6-17-2016

Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukeet, IA Dallas County

Describe present phase of construction

Paving

Type of Inspection

☒ Regular

☐ Pre-storm event

☐ During storm event

☐ Post-storm event

Weather Information

Has it rained since the last inspection?

☐ Yes

☒ No

If yes, provide:

Storm Start Date & Time: 6/14 8pm

Storm Duration (hrs):

3 approximate rainfall(inches)

0.36

Weather at time of this inspection?

87 degrees clear

Do you suspect discharges may have occurred since the last inspection?

☒ Yes

☐ No

Are there any discharges at the time of inspection?

☐ Yes

☒ No

Overall Site Issues

BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

Mainline paving has started. Working west to east.

Observation Report Certification Statement

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.

Signed

Date

Date: 6-17-2016

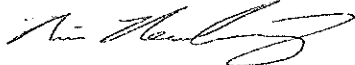
Development Inspector:

515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 6-10-2016

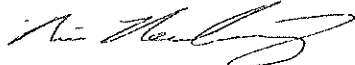
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukeet, IA Dallas County

Describe present phase of construction		Paving			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 6/3 9pm		Storm Duration (hrs): 2 approximate rainfall(inches): 0.07	
Weather at time of this inspection?		91 degrees clear			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No	
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>			
Remarks					
Paving equipment is on site					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					Date: 6-10-2016
			Development Inspector:		515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 6-3-2016

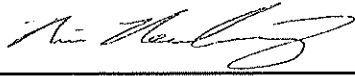
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukeet, IA Dallas County

Describe present phase of construction		subgrade prep			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 5/31 3pm		Storm Duration (hrs): 3 approximate rainfall(inches) 0.75	
Weather at time of this inspection?		83 degrees partly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No	
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>			
Remarks					
most subgrade prep is done, they will need to re-roll it after heavy rain Tuesday.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					Date: 6-3-2016
			Development Inspector:		515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 5-27-2016

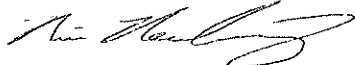
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukee, IA Dallas County

Describe present phase of construction		subgrade prep			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 5/26 1am		Storm Duration (hrs): 23 approximate rainfall(inches): 1.19	
Weather at time of this inspection?		64 degrees light rain			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action		Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>			
Remarks					
Alliance and Mcaninch got some subgrade prep done on the west side of site, rain has halted them last couple days, no one working today.					
Observation Report Certification Statement			Signed		Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.					Date: 5-27-2016
			Development Inspector:		515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 5-20-2016

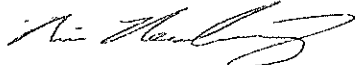
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukeet, IA Dallas County

Describe present phase of construction		Pipe- subgrade prep			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time:	Storm Duration (hrs):	approximate rainfall(inches)	
Weather at time of this inspection?		68 degrees cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>			
Remarks					
Pipe crew has temporarily left, still have trenches to finish before final plat.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 5-20-2016	
			Development Inspector:	515-608-3296	



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 5-13-2016

Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukeet, IA Dallas County

Describe present phase of construction		Storm sewer, pipe		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 5/11 6am	Storm Duration (hrs): 12	approximate rainfall(inches): 0.34
Weather at time of this inspection?		58 degrees drizzle		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		
Remarks				
Mcaninch still on site in rain working. They have another week left of pipe. Tidy site installed new fence in bailey west basin area close to westown.				
Observation Report Certification Statement			Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 5-13-2016
			Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 5-6-2016

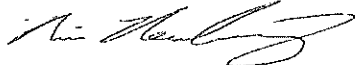
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukeet, IA Dallas County

Describe present phase of construction		Storm sewer, pipe		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 4/30 5am	Storm Duration (hrs):	34 approximate rainfall(inches) 0.95
Weather at time of this inspection?		76 degrees sunny		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		

Remarks

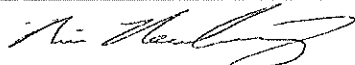
Mcaninch working on pipe-storm structures. Tidy site swept end of warrior ln and waddell/pleasant view area on Wednesday due to track-out.

Observation Report Certification Statement	Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.		Date: 5-6-2016
	Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 4-29-2016

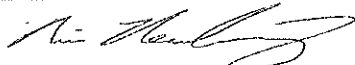
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plat 10 Waukeet, IA Dallas County

Describe present phase of construction		Pipe Install Water/storm			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:		Storm Start Date & Time: 4/27 3am		Storm Duration (hrs): 18 approximate rainfall(inches): 0.88	
Weather at time of this inspection?		52 degrees cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Remarks					
Streets were swept by Speck on Tuesday. Warrior Ln and Wadell have had track-out from Mcaninch driving out of plat 10. Mcaninch finishing storm structures.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 4-29-2016	
			Development Inspector:	515-608-3296	



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 4-22-2016

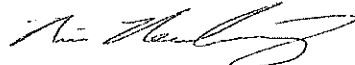
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 10 Waukee, IA Dallas County

Describe present phase of construction		Pipe: Storm Sewer		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 4/21 7am	Storm Duration (hrs):	6 approximate rainfall(inches) 0.14
Weather at time of this inspection?		58 degrees overcast		
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		
Remarks				
Mcaninch not working much today, nearly an inch of rain from Wednesday and Thursday. Still need to finish setting box intakes before subgrade can begin.				
Observation Report Certification Statement			Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 4-22-2016
			Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 4-15-2016

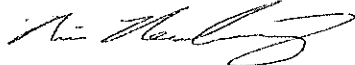
Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 10 Waukeet, IA Dallas County

Describe present phase of construction		Pipe: Storm Sewer		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If yes, provide: Storm Start Date & Time:		Storm Duration (hrs):		approximate rainfall(inches)
Weather at time of this inspection?		70 degrees partly cloudy		
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		
Remarks				
Site was dry. Mcaninch had to rip out a few of the checks we had going west along westown. We added checks down around westown/warrior lane intersection(future). Also added checks on west side of construction entrance.				
Observation Report Certification Statement			Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 4-15-2016
			Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 4-8-2016

Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 10 Waukee, IA Dallas County

Describe present phase of construction		Pipe: Storm Sewer		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 4/5 9pm	Storm Duration (hrs):	5 approximate rainfall(inches) 0.59
Weather at time of this inspection?		47 degrees scattered clouds		
Do you suspect discharges may have occurred since the last inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		
Remarks				
seeded areas down along sugar creek, westown, and far east back yard areas starting to green up really well. Ordered more silt fence for construction entrance area going down toward sugar creek. Mcaninch was working on outlet structure for pond.				
Observation Report Certification Statement			Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 4-8-2016
			Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 3-25-2016

Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukee, IA Dallas County

Describe present phase of construction		Pipe		
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event
Weather Information				
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, provide:		Storm Start Date & Time: 3/23 8pm	Storm Duration (hrs): 2	approximate rainfall(inches): 0.36
Weather at time of this inspection?		34 degrees sunny-frost		
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Overall Site Issues				
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No		
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>		
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>		
Remarks				
Frost in the morning. Light rain forecast for this weekend.				
Observation Report Certification Statement			Signed	Date
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 3-25-2016
			Development Inspector:	515-608-3296



Hubbell Site Inspections
Inspector: Nick Newbury
Date: 3-18-2016

Permit Number: IA-9433-9235 Expires 5/31/2017
Location: Glynn Village Plats 8-10 Waukeet, IA Dallas County

Describe present phase of construction		Pipe			
Type of Inspection	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Pre-storm event	<input type="checkbox"/> During storm event	<input type="checkbox"/> Post-storm event	
Weather Information					
Has it rained since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, provide:		Storm Start Date & Time: 3/15 4am	Storm Duration (hrs):	20 approximate rainfall(inches)	0.94
Weather at time of this inspection?		38 degrees mostly cloudy			
Do you suspect discharges may have occurred since the last inspection?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Are there any discharges at the time of inspection?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Overall Site Issues					
BMP/activity	Implemented	Maintained	Corrective Action	Date for corrective action/	
Are perimeter controls/sediment barriers adequately installed and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are all slopes and areas not being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are natural resource areas/streams etc. protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are discharge points free of sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are storm drain inlets properly protected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is there evidence of sediment being tracked into streets?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is trash from work areas collected in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Are wash out facilities available and maintained?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> yes <input type="checkbox"/> No			
Are vehicle & equipment fueling/maintenance areas free of spills?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> yes <input type="checkbox"/>			
Are materials that are potential storm water contaminants stored inside or covered?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/>			
Remarks					
Tidy site installed new fence along south side of site/westown. Mcaninch also cleaned out rock check dams along westown.					
Observation Report Certification Statement			Signed	Date	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure the qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations.				Date: 3-18-2016	
			Development Inspector:	515-608-3296	

Contractor/Subcontractor Certification Statement
For
Glynn Village Plat 10
Waukee, IA

NPDES Permit Authorization Number: 9433-9235

Contractor/Subcontractor: Tidy Site Services
Address: 175 South 9th Street West Des Moines, IA 50265
Phone Number: (515) 480-1818
Date: 6/1/2015

"I certify under penalty of law that I understand the terms and conditions of the general National Pollutant Discharge Elimination System (NPDES) permit that authorized the stormwater discharges associated with the industrial activity from the construction site as part of this certification. Further, by my signature, I understand that I am becoming a co-permittee, along with the owner(s) and other contractors and subcontractors signing such certifications, to the Iowa Department of Natural Resources NPDES General Permit No. 2 for "Stormwater Discharge Associated with Industrial Activity for Construction Activities" at the identified site. As a co-permittee, I understand that I, and my company, are legally required under the Clean Water Act and the Code of Iowa, to ensure compliance with the terms and condition of the stormwater pollution prevention plan developed under this NPDES permit and the terms of this NPDES permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Signed: _____

Date Signed: _____

Title: _____